



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND**Visit Information****Nursing Assessment**

No Nursing Assessment available for this encounter.

Markcus Kitchens
2/6/2023 Telephone
MRN: 8912785729

Description: **31 year old male**
Provider: **Holbrook, Tina, APRN**
Department: **MGE BEHAV HLTH RIC**

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
OASIS Summary****Demographics/General Information**

Patient Name (M0040)	Patient ID (M0020)	Gender (M0069)	Birth Date (M0066)
Kitchens, Marcus	8912785729	Male	
Attending Physician	Attending Physician NPI (M0018)		
Unknown or Not Available	—		
Patient Street Address	Patient Telephone Number		
	—		

Additional Demographics

SSN (M0064): Medicare Number (M0063): NA - No Medicare Medicaid Number (M0065): NA - No Medicaid

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)****Patient as-of Visit (group 1 of 2)****Active Coverages as of 2/6/2023****ANTHEM MEDICAID**

Plan: ANTHEM MEDICAID Group: KYMCDWP0 Member: XTF732302565
Effective from: 4/1/2022 Subscriber: KITCHENS,MARKCUS Subscriber ID: XTF732302565
Guarantor: KITCHENS,MARKCUS

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)****History as of 2/6/2023****Medical History as of 2/6/2023**

Medical last reviewed by Holbrook, Tina, APRN on 2/6/2023
None

Surgical History as of 2/6/2023

Surgical last reviewed by Holbrook, Tina, APRN on 2/6/2023

Past Surgical History

Procedure	Laterality	Date	Comments	Source
WISDOM TOOTH EXTRACTION	N/A	—	—	Patient

Family History as of 2/6/2023



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(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Family History as of 2/6/2023

E-cigarette/Vaping

Questions	Responses
E-cigarette/Vaping Use	Never User
Start Date	
Passive Exposure	No
Quit Date	
Counseling Given	No
Comments	

E-cigarette/Vaping Substances

Questions	Responses
Nicotine	No
THC	No
CBD	No
Flavoring	No
Other	

E-cigarette/Vaping Devices

Questions	Responses
Disposable	No
Pre-filled or Refillable Cartridge	No
Refillable Tank	No
Pre-filled Pod	No
Other	

Substance & Sexuality History as of 2/6/2023

Tobacco Use as of 2/6/2023

Tobacco Use last reviewed by Holbrook, Tina, APRN on 2/6/2023

Smoking Status	Smoking Start Date	Quit Date	Smoking Frequency
Never	—	—	
Smokeless Status	Smokeless Type	Smokeless Quit Date	
Never	—	—	
Source			
—			

Alcohol Use as of 2/6/2023

Alcohol Use last reviewed by Fleming, Raquel, CMA on 2/6/2023

Alcohol Use	Drinks/Week	Alcohol/Week	Comments	Source
Never	—	—	—	Provider

Drug Use as of 2/6/2023

Drug Use last reviewed by Fleming, Raquel, CMA on 2/6/2023

Drug Use	Types	Frequency	Comments	Source
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(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Never

Provider

Sexual Activity as of 2/6/2023

Sexual Activity last reviewed by Fleming, Raquel, CMA on 2/6/2023

Sexually Active	Birth Control	Partners	Comments	Source
Yes	—	Female	—	Provider

Socioeconomic History as of 2/6/2023

Socioeconomic as of 2/6/2023

Marital Status	Spouse Name	Number of Children	Years Education	Education Level	Preferred Language	Ethnicity	Race	Source
Married	—	—	—	—	English	Not Hispanic or Latino	Black or African American	—

Allergies as of 2/6/2023

Allergies last reviewed by Holbrook, Tina, APRN on 2/6/2023 1028
No Known Allergies

Immunizations as of 2/6/2023

Immunizations last reviewed by Clark, Courtney, MA on 3/23/2021 1337

COVID-19 (MODERNA) BIVALENT BOOSTER 12+YRS [last edited by Malicote, Natasha L, CMA on 11/19/2022 0935]

Administered on: 9/22/2022	Dose: 0.5 mL	Site: Left deltoid
Route: Intramuscular	CVX code: 229	
Manufacturer: MODERNA US INC	Lot number: AS7140C	Location: MEIJER258

COVID-19 (PFIZER) PURPLE CAP [automatically reconciled from Kentucky Immunization Registry (KYIR) on 4/28/2022 0919]

Administered on: 3/25/2021	Dose: 0.3 mL	Site: Left arm
Route: Intramuscular	CVX code: 208	
Manufacturer: PFIZER-BIONTECH	Lot number: ER8Z30	External: Auto Reconciled From Outside Source
Location: 19411		

COVID-19 (PFIZER) PURPLE CAP [automatically reconciled from Kentucky Immunization Registry (KYIR) on 4/28/2022 0919]

Administered on: 4/15/2021	Dose: 0.3 mL	Site: Left arm
Route: Intramuscular	CVX code: 208	
Manufacturer: PFIZER-BIONTECH	Lot number: EL3302	External: Auto Reconciled From Outside Source
Location: 19411		

COVID-19 (PFIZER) PURPLE CAP [automatically reconciled from Kentucky Immunization Registry (KYIR) on 4/28/2022 0919]

Administered on: 11/29/2021	Dose: 0.3 mL	Site: Left deltoid
Route: Intramuscular	CVX code: 208	
Manufacturer: PFIZER-BIONTECH	Lot number: FE3590	External: Auto Reconciled From Outside Source
Location: MEIJER258		



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(continued)**

Patient as-of Visit (group 1 of 2) (continued)

DTaP 5 [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1992 CVX code: 106

DTaP 5 [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 2/28/1996 CVX code: 106

DTaP 5 [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 106

DTaP 5 [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 3/16/1992 CVX code: 106

DTaP 5 [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 7/28/1992 CVX code: 106

Hep A, 2 Dose [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/1/2013 CVX code: 83

Hep B, Adolescent or Pediatric [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 3/18/1994 CVX code: 08

Hep B, Adolescent or Pediatric [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 11/17/1992 CVX code: 08

Hep B, Adolescent or Pediatric [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 12/16/1992 CVX code: 08

Hepatitis A [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 2/9/2012 CVX code: 52

Previous revisions

Hepatitis A [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 2/9/2012 CVX code: 52

Hepatitis A [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 4/7/2009 CVX code: 52

Previous revisions

Hepatitis A [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 4/7/2009 CVX code: 52

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 47

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 3/16/1992 CVX code: 47

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]



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(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Administered on: 7/28/1992 CVX code: 47

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1992 CVX code: 47

IPV [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 4/1/2013 CVX code: 10

Previous revisions

IPV [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 4/1/2013 CVX code: 10

IPV [last edited by Clark, Courtney, MA on 3/23/2021 1337]

Administered on: 4/1/2013 CVX code: 10

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 5/26/1993 CVX code: 03

Previous revisions

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 5/26/1993 CVX code: 03

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 03

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 2/28/1996 CVX code: 03

Previous revisions

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 2/28/1996 CVX code: 03

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 2/28/1996 CVX code: 03

Meningococcal MCV4P (Menactra) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/7/2009 CVX code: 114

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 02

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 3/16/1992 CVX code: 02

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1992 CVX code: 02

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

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(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Administered on: 2/28/1996 CVX code: 02

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 4/7/2009 CVX code: 115

Previous revisions

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 4/7/2009 CVX code: 115

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/7/2009 CVX code: 115

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 5/20/2019 CVX code: 115

Typhoid, Unspecified [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 6/1/2012 CVX code: 91

Yellow Fever [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/1/2013 CVX code: 37

Immunization Review History

User	Reviewed On
Clark, Courtney, MA	03/23/2021 1337
Clark, Courtney, MA	03/23/2021 1337



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**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient as-of Visit (group 2 of 2)

Problem List as of 2/6/2023

Problems last reviewed by Holbrook, Tina, APRN on 2/6/2023 1028

Anxiety [last edited by Yin, Arthur G, MD on 2/10/2022 1529]

Diagnosis: Anxiety Noted on: 03/23/2021 Chronic: No

Previous Revisions

Test anxiety [last edited by Yin, Arthur G, MD on 3/23/2021 1403]

Diagnosis: Test anxiety Noted on: 03/23/2021 Chronic: No

Anxiety [last edited by Yin, Arthur G, MD on 3/23/2021 1347]

Diagnosis: Anxiety Noted on: 03/23/2021 Chronic: No

Attention deficit disorder [last edited by Yin, Arthur G, MD on 3/23/2021 1347]

Diagnosis: Attention deficit disorder Noted on: 03/23/2021 Chronic: No

Bilateral impacted cerumen [last edited by Yin, Arthur G, MD on 2/10/2022 1519]

This problem has been resolved.

Diagnosis: Bilateral impacted cerumen Noted on: 08/05/2021 Resolved on: 2/10/2022
Chronic: No

Previous Revisions

Bilateral impacted cerumen [last edited by Yin, Arthur G, MD on 8/5/2021 1038]

Diagnosis: Bilateral impacted cerumen Noted on: 08/05/2021 Chronic: No

Problem List Review History

User	Reviewed On
Holbrook, Tina, APRN	02/06/2023 1028
Holbrook, Tina, APRN	02/06/2023 1024
Holbrook, Tina, APRN	02/06/2023 1013
Holbrook, Tina, APRN	02/06/2023 1010
Holbrook, Tina, APRN	01/10/2023 1034
Holbrook, Tina, APRN	01/10/2023 1034
Holbrook, Tina, APRN	01/10/2023 1020
Holbrook, Tina, APRN	01/10/2023 1017
Holbrook, Tina, APRN	01/10/2023 1013
Patel, Ashish M, MD	11/19/2022 1008
Holbrook, Tina, APRN	11/14/2022 0910
Holbrook, Tina, APRN	11/14/2022 0905
Holbrook, Tina, APRN	09/22/2022 0955
Holbrook, Tina, APRN	09/05/2022 2009
Yin, Arthur G, MD	08/05/2021 0925

Current & Discharge Medications as of Visit

Medication List

ⓘ This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.



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**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Current & Discharge Medications as of Visit (continued)

Active at the End of Visit

propranolol (INDERAL) 20 MG tablet

Instructions: Take 1 tablet by mouth 3 (Three) Times a Day.
Authorized by: Yin, Arthur G, MD
Start date: 2/10/2022
Refill: 3 refills by 2/10/2023

Ordered on: 2/10/2022
Quantity: 270 tablet

amphetamine-dextroamphetamine (ADDERALL) 20 MG tablet

Discontinued by: Baula, Kristine, MD
Reason for discontinuation: Reorder
Instructions: Take 1 tablet by mouth 2 (Two) Times a Day.
Authorized by: Holbrook, Tina, APRN
Start date: 1/10/2023
Quantity: 60 tablet

Discontinued on: 3/24/2023

Ordered on: 1/10/2023
End date: 3/24/2023
Refill: No refills remaining

meloxicam (MOBIC) 7.5 MG tablet

Discontinued by: Baula, Kristine, MD
Instructions: Take 1 tablet by mouth Daily.
Entered by: Fleming, Raquel, CMA
Start date: 12/1/2022
Action: Patient not taking

Discontinued on: 3/24/2023

Entered on: 2/6/2023
End date: 3/24/2023

multivitamin with minerals tablet tablet

Instructions: Take 1 tablet by mouth Daily.
Entered by: Fleming, Raquel, CMA

Entered on: 2/6/2023

Stopped in Visit

None

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
Specialty MTP Audit Snapshot**

Medication Therapy Problems Showing updates made on or before 2/6/2023

There are no MTPs to display.

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**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

ED Events

None



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**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Clinical Notes

Telephone Encounter

Holbrook, Tina, APRN at 2/6/2023 1609

Author: Holbrook, Tina, APRN
Filed: 02/06/23 1611
Status: Signed

Service: —
Encounter Date: 2/6/2023
Editor: Holbrook, Tina, APRN (Nurse Practitioner)

Author Type: Nurse Practitioner
Creation Time: 02/06/23 1609

Please let him know that I have consulted with Dr. Martin on the letter he is requesting. Letter completed and placed in MyChart.

Electronically signed by Holbrook, Tina, APRN at 02/06/23 1611

Fleming, Raquel, CMA at 2/6/2023 1621

Author: Fleming, Raquel, CMA
Filed: 02/06/23 1626
Status: Signed

Service: —
Encounter Date: 2/6/2023
Editor: Fleming, Raquel, CMA (Medical Assistant)

Author Type: Medical Assistant
Creation Time: 02/06/23 1621

SPOKE TO PATIENT HE SAID IT IS NOT AS DETAILED AS IT SHOULD BE. HE SAID IT ALSO NEEDS TO INCLUDE ACCOMODATION'S 100 PERCENT OF TIME PLUS 100%. AT THE CLINIC YOU USE CONNOR AS A TOOL AND PUT A SUMMARY THAT WAS OBSERVED FROM THERE IS WHAT HE NEED. HE SAID THIS LETTER IS TO VAGUE

Electronically signed by Fleming, Raquel, CMA at 02/06/23 1626

Holbrook, Tina, APRN at 2/6/2023 1654

Author: Holbrook, Tina, APRN
Filed: 02/06/23 1654
Status: Signed

Service: —
Encounter Date: 2/6/2023
Editor: Holbrook, Tina, APRN (Nurse Practitioner)

Author Type: Nurse Practitioner
Creation Time: 02/06/23 1654

Again, I consulted with Dr. Martin about details that could be included in letter. Copy of CPT given for him to submit. He can call MindPsi at 859 624-2454 and schedule for the psychological evaluation discussed. This will further assess more specific needs for accommodations.

Electronically signed by Holbrook, Tina, APRN at 02/06/23 1654

Fleming, Raquel, CMA at 2/6/2023 1657

Author: Fleming, Raquel, CMA
Filed: 02/06/23 1657
Status: Signed

Service: —
Encounter Date: 2/6/2023
Editor: Fleming, Raquel, CMA (Medical Assistant)

Author Type: Medical Assistant
Creation Time: 02/06/23 1657

Can you please talk to patient?

Electronically signed by Fleming, Raquel, CMA at 02/06/23 1657

Holbrook, Tina, APRN at 2/6/2023 1737

Author: Holbrook, Tina, APRN
Filed: 02/06/23 1737
Status: Signed

Service: —
Encounter Date: 2/6/2023
Editor: Holbrook, Tina, APRN (Nurse Practitioner)

Author Type: Nurse Practitioner
Creation Time: 02/06/23 1737

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)****Clinical Notes (continued)**

Thanks

Electronically signed by Holbrook, Tina, APRN at 02/06/23 1737

Fleming, Raquel, CMA at 2/7/2023 0901Author: Fleming, Raquel, CMA
Filed: 02/07/23 0902
Status: SignedService: —
Encounter Date: 2/6/2023
Editor: Fleming, Raquel, CMA (Medical Assistant)Author Type: Medical Assistant
Creation Time: 02/07/23 0901

Patient called in states he had a missed call from this office. Lisa had called him to give next appointment that was scheduled 04/11/23 arrival 09:45am.

Electronically signed by Fleming, Raquel, CMA at 02/07/23 0902

**02/06/2023 - Telephone in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Instructions for After Discharge

Patient Instructions

None

- Call **911** or have someone take you to the Emergency Department if you have any of the following:
- Sudden numbness or weakness of your face, arm or leg especially on one side of the body
- Sudden confusion, difficulty speaking or trouble understanding
- Changes in your vision or loss of sight in one eye
- Sudden severe headache with no known cause
- Sudden dizziness, trouble walking, loss of balance or coordination

It is important to seek emergency care right away if you have further stroke symptoms. If you get emergency help quickly, the powerful clot-dissolving medicines can reduce the disabilities caused by a stroke.

For more information:

American Stroke Association
1-888-4-STROKE
www.strokeassociation.org**IF YOU SMOKE OR USE TOBACCO PLEASE READ THE FOLLOWING:****Why is smoking bad for me?**

Smoking increases the risk of heart disease, lung disease, vascular disease, stroke, and cancer. If you smoke, **STOP!**

For more information:

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(continued)**

Quit Now Kentucky

1-800-QUIT-NOW

<https://kentucky.quitlogix.org/en-US/>

If you feel like life is too tough and are thinking of suicide or injuring yourself, get help right away!

- Call or text 988 to speak to someone.



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02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND

Visit Information

Provider Information

Encounter Provider	Authorizing Provider
Holbrook, Tina, APRN	Holbrook, Tina, APRN

Department

Name	Address	Phone	Fax
BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND	789 EASTERN BYPASS STE 23 Richmond KY 40475-2421	859-544-8171	859-544-8197

Follow-up and Dispositions

- Return for Next scheduled follow up in April for medication management.

Level of Service

Level of Service
PR OFFICE/OUTPATIENT ESTABLISHED MOD MDM 30-39 MIN

Clinical Impression/Visit Diagnoses

Visit diagnosis: ADHD (attention deficit hyperactivity disorder), inattentive type

Markus Kitchens

2/6/2023 10:00 AM Office Visit
MRN: 8912785729

Description: 31 year old male
Provider: Holbrook, Tina, APRN
Department: MGE BEHAV HLTH RIC

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND OASIS Summary

Demographics/General Information

Patient Name (M0040)	Patient ID (M0020)	Gender (M0069)	Birth Date (M0066)
Kitchens, Marcus	8912785729	Male	
Attending Physician	Attending Physician NPI (M0018)		
Unknown or Not Available	—		
Patient Street Address	Patient Telephone Number		
—	—		

Additional Demographics

SSN (M0064): Medicare Number (M0063): NA - No Medicare Medicaid Number (M0065): NA - No Medicaid

Physical Assessment - Vitals

Chief Complaint

Blood Pressure

BP (Location)	Blood Pressure (Lying)	Blood Pressure (Sitting)	Blood Pressure (Standing)
		104/68	

Pulse

Pulse (Rhythm)	Pulse (Apical)	Pulse (Radial)
		59

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
OASIS Summary (continued)**

Physical Assessment - Vitals (continued)

Pulse Oximetry

Weight/Height

Weight	Height	BMI	BSA
64.9 kg (143 lb) (actual)	180.3 cm (71")	19.94 kg/m ²	1.83 m ²

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Appointment Information

MEDICINE CHECK
2/6/2023 10:00 AM

Completed
Copoly Due: \$0.00

Time	Provider	Department	Length
10:00 AM			30 min

Arrival Time: 9:35 AM Enc Form Number: 32568364

Notes:

CONF 945 ARR

History

Rescheduled:	2/1/2023 10:34 AM	By:	Ison, Kandice, RegSched Rep	ES
Change Notes:	2/3/2023 9:31 AM	By:	Hill, Megan, RegSched Rep	ES
Change Notes:	2/3/2023 9:53 AM	By:	Hill, Megan, RegSched Rep	ES
Change Notes:	2/3/2023 9:56 AM	By:	Hill, Megan, RegSched Rep	ES
Confirmed:	2/3/2023 10:42 AM	By:	Hill, Megan, RegSched Rep	ES
Checked In:	2/6/2023 9:35 AM	By:	Hill, Megan, RegSched Rep	ES
Remove Arr.:	2/6/2023 9:39 AM	By:	Fleming, Raquel, CMA	MR
Checked Out:	2/6/2023 10:34 AM	By:	Hill, Megan, RegSched Rep	ES

Patient as-of Visit (group 1 of 2)

Active Coverages as of 2/6/2023

ANTHEM MEDICAID

Plan: ANTHEM MEDICAID
Effective from: 4/1/2022
Guarantor: KITCHENS,MARKCUS

Group: KYMCDWP0
Subscriber: KITCHENS,MARKCUS

Member: XTF732302565
Subscriber ID: XTF732302565

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

History as of 2/6/2023

Medical History as of 2/6/2023

Medical last reviewed by Holbrook, Tina, APRN on 2/6/2023
None

Surgical History as of 2/6/2023



BAPTIST HEALTH MEDICAL
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Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Surgical last reviewed by Holbrook, Tina, APRN on 2/6/2023

Past Surgical History

Procedure	Laterality	Date	Comments	Source
WISDOM TOOTH EXTRACTION	N/A	—	—	Patient

Family History as of 2/6/2023

Family History as of 2/6/2023

E-cigarette/Vaping

Questions	Responses
E-cigarette/Vaping Use	Never User
Start Date	
Passive Exposure	No
Quit Date	
Counseling Given	No
Comments	

E-cigarette/Vaping Substances

Questions	Responses
Nicotine	No
THC	No
CBD	No
Flavoring	No
Other	

E-cigarette/Vaping Devices

Questions	Responses
Disposable	No
Pre-filled or Refillable Cartridge	No
Refillable Tank	No
Pre-filled Pod	No
Other	

Substance & Sexuality History as of 2/6/2023

Tobacco Use as of 2/6/2023

Tobacco Use last reviewed by Holbrook, Tina, APRN on 2/6/2023

Smoking Status	Smoking Start Date	Quit Date	Smoking Frequency
Never	—	—	
Smokeless Status	Smokeless Type	Smokeless Quit Date	
Never	—	—	
Source			
—			

Alcohol Use as of 2/6/2023

Alcohol Use last reviewed by Fleming, Raquel, CMA on 2/6/2023



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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Alcohol Use	Drinks/Week	Alcohol/Week	Comments	Source
Never	—	—	—	Provider

Drug Use as of 2/6/2023

Drug Use last reviewed by Fleming, Raquel, CMA on 2/6/2023

Drug Use	Types	Frequency	Comments	Source
Never	—	—	—	Provider

Sexual Activity as of 2/6/2023

Sexual Activity last reviewed by Fleming, Raquel, CMA on 2/6/2023

Sexually Active	Birth Control	Partners	Comments	Source
Yes	—	Female	—	Provider

Socioeconomic History as of 2/6/2023

Socioeconomic as of 2/6/2023

Marital Status	Spouse Name	Number of Children	Years Education	Education Level	Preferred Language	Ethnicity	Race	Source
Married	—	—	—	—	English	Not Hispanic or Latino	Black or African American	—

Allergies as of 2/6/2023

Allergies last reviewed by Holbrook, Tina, APRN on 2/6/2023 1028
No Known Allergies

Immunizations as of 2/6/2023

Immunizations last reviewed by Clark, Courtney, MA on 3/23/2021 1337

COVID-19 (MODERNA) BIVALENT BOOSTER 12+YRS [last edited by Malicote, Natasha L, CMA on 11/19/2022 0935]

Administered on: 9/22/2022	Dose: 0.5 mL	Site: Left deltoid
Route: Intramuscular	CVX code: 229	
Manufacturer: MODERNA US INC	Lot number: AS7140C	Location: MEIJER258

COVID-19 (PFIZER) PURPLE CAP [automatically reconciled from Kentucky Immunization Registry (KYIR) on 4/28/2022 0919]

Administered on: 3/25/2021	Dose: 0.3 mL	Site: Left arm
Route: Intramuscular	CVX code: 208	
Manufacturer: PFIZER-BIONTECH	Lot number: ER8Z30	External: Auto Reconciled From Outside Source
Location: 19411		

COVID-19 (PFIZER) PURPLE CAP [automatically reconciled from Kentucky Immunization Registry (KYIR) on 4/28/2022 0919]

Administered on: 4/15/2021	Dose: 0.3 mL	Site: Left arm
Route: Intramuscular	CVX code: 208	
Manufacturer: PFIZER-BIONTECH	Lot number: EL3302	External: Auto Reconciled From Outside



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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Location: 19411		Source
COVID-19 (PFIZER) PURPLE CAP <i>[automatically reconciled from Kentucky Immunization Registry (KYIR) on 4/28/2022 0919]</i>		
Administered on: 11/29/2021	Dose: 0.3 mL	Site: Left deltoid
Route: Intramuscular	CVX code: 208	
Manufacturer: PFIZER-BIONTECH	Lot number: FE3590	External: Auto Reconciled From Outside Source
Location: MEIJER258		
DTaP 5 <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 5/26/1992	CVX code: 106	
DTaP 5 <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 2/28/1996	CVX code: 106	
DTaP 5 <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 5/26/1993	CVX code: 106	
DTaP 5 <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 3/16/1992	CVX code: 106	
DTaP 5 <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 7/28/1992	CVX code: 106	
Hep A, 2 Dose <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 4/1/2013	CVX code: 83	
Hep B, Adolescent or Pediatric <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 3/18/1994	CVX code: 08	
Hep B, Adolescent or Pediatric <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 11/17/1992	CVX code: 08	
Hep B, Adolescent or Pediatric <i>[last edited by Clark, Courtney, MA on 3/23/2021 1336]</i>		
Administered on: 12/16/1992	CVX code: 08	
Hepatitis A <i>[last edited by Clark, Courtney, MA on 3/23/2021 1459]</i>		
Administered on: 2/9/2012	CVX code: 52	
Previous revisions		
Hepatitis A <i>[last edited by Clark, Courtney, MA on 3/23/2021 1458]</i>		
Administered on: 2/9/2012	CVX code: 52	
Hepatitis A <i>[last edited by Clark, Courtney, MA on 3/23/2021 1459]</i>		
Administered on: 4/7/2009	CVX code: 52	
Previous revisions		
Hepatitis A <i>[last edited by Clark, Courtney, MA on 3/23/2021 1458]</i>		
Administered on: 4/7/2009	CVX code: 52	



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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient as-of Visit (group 1 of 2) (continued)

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 47

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 3/16/1992 CVX code: 47

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 7/28/1992 CVX code: 47

Hib (HbOC) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1992 CVX code: 47

IPV [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 4/1/2013 CVX code: 10

Previous revisions

IPV [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 4/1/2013 CVX code: 10

IPV [last edited by Clark, Courtney, MA on 3/23/2021 1337]

Administered on: 4/1/2013 CVX code: 10

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 5/26/1993 CVX code: 03

Previous revisions

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 5/26/1993 CVX code: 03

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 03

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 2/28/1996 CVX code: 03

Previous revisions

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 2/28/1996 CVX code: 03

MMR [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 2/28/1996 CVX code: 03

Meningococcal MCV4P (Menactra) [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/7/2009 CVX code: 114

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1993 CVX code: 02

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
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Patient as-of Visit (group 1 of 2) (continued)

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 3/16/1992 CVX code: 02

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 5/26/1992 CVX code: 02

OPV [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 2/28/1996 CVX code: 02

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 4/7/2009 CVX code: 115

Previous revisions

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1458]

Administered on: 4/7/2009 CVX code: 115

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/7/2009 CVX code: 115

Tdap [last edited by Clark, Courtney, MA on 3/23/2021 1459]

Administered on: 5/20/2019 CVX code: 115

Typhoid, Unspecified [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 6/1/2012 CVX code: 91

Yellow Fever [last edited by Clark, Courtney, MA on 3/23/2021 1336]

Administered on: 4/1/2013 CVX code: 37

Immunization Review History

User	Reviewed On
Clark, Courtney, MA	03/23/2021 1337
Clark, Courtney, MA	03/23/2021 1337



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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient as-of Visit (group 2 of 2)

Problem List as of 2/6/2023

Problems last reviewed by Holbrook, Tina, APRN on 2/6/2023 1028

Anxiety [last edited by Yin, Arthur G, MD on 2/10/2022 1529]

Diagnosis: Anxiety Noted on: 03/23/2021 Chronic: No

Previous Revisions

Test anxiety [last edited by Yin, Arthur G, MD on 3/23/2021 1403]

Diagnosis: Test anxiety Noted on: 03/23/2021 Chronic: No

Anxiety [last edited by Yin, Arthur G, MD on 3/23/2021 1347]

Diagnosis: Anxiety Noted on: 03/23/2021 Chronic: No

Attention deficit disorder [last edited by Yin, Arthur G, MD on 3/23/2021 1347]

Diagnosis: Attention deficit disorder Noted on: 03/23/2021 Chronic: No

Bilateral impacted cerumen [last edited by Yin, Arthur G, MD on 2/10/2022 1519]

This problem has been resolved.

Diagnosis: Bilateral impacted cerumen Noted on: 08/05/2021 Resolved on: 2/10/2022
Chronic: No

Previous Revisions

Bilateral impacted cerumen [last edited by Yin, Arthur G, MD on 8/5/2021 1038]

Diagnosis: Bilateral impacted cerumen Noted on: 08/05/2021 Chronic: No

Problem List Review History

User	Reviewed On
Holbrook, Tina, APRN	02/06/2023 1028
Holbrook, Tina, APRN	02/06/2023 1024
Holbrook, Tina, APRN	02/06/2023 1013
Holbrook, Tina, APRN	02/06/2023 1010
Holbrook, Tina, APRN	01/10/2023 1034
Holbrook, Tina, APRN	01/10/2023 1034
Holbrook, Tina, APRN	01/10/2023 1020
Holbrook, Tina, APRN	01/10/2023 1017
Holbrook, Tina, APRN	01/10/2023 1013
Patel, Ashish M, MD	11/19/2022 1008
Holbrook, Tina, APRN	11/14/2022 0910
Holbrook, Tina, APRN	11/14/2022 0905
Holbrook, Tina, APRN	09/22/2022 0955
Holbrook, Tina, APRN	09/05/2022 2009
Yin, Arthur G, MD	08/05/2021 0925

Current & Discharge Medications as of Visit

Medication List

ⓘ This report is for documentation purposes only. The patient should not follow medication instructions within. For accurate instructions regarding medications, the patient should instead consult their physician or after visit summary.

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(continued)

Current & Discharge Medications as of Visit (continued)

Active at the End of Visit

propranolol (INDERAL) 20 MG tablet

Instructions: Take 1 tablet by mouth 3 (Three) Times a Day.
 Authorized by: Yin, Arthur G, MD
 Start date: 2/10/2022
 Refill: 3 refills by 2/10/2023

Ordered on: 2/10/2022
 Quantity: 270 tablet

amphetamine-dextroamphetamine (ADDERALL) 20 MG tablet

Discontinued by: Baula, Kristine, MD
 Reason for discontinuation: Reorder
 Instructions: Take 1 tablet by mouth 2 (Two) Times a Day.
 Authorized by: Holbrook, Tina, APRN
 Start date: 1/10/2023
 Quantity: 60 tablet

Discontinued on: 3/24/2023

Ordered on: 1/10/2023
 End date: 3/24/2023
 Refill: No refills remaining

meloxicam (MOBIC) 7.5 MG tablet

Discontinued by: Baula, Kristine, MD
 Instructions: Take 1 tablet by mouth Daily.
 Entered by: Fleming, Raquel, CMA
 Start date: 12/1/2022
 Action: Patient not taking

Discontinued on: 3/24/2023

Entered on: 2/6/2023
 End date: 3/24/2023

multivitamin with minerals tablet tablet

Instructions: Take 1 tablet by mouth Daily.
 Entered by: Fleming, Raquel, CMA

Entered on: 2/6/2023

Stopped in Visit

None

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
Specialty MTP Audit Snapshot

Medication Therapy Problems Showing updates made on or before 2/6/2023

There are no MTPs to display.

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

ED Events

None

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Clinical Notes

Progress Notes

Holbrook, Tina, APRN at 2/6/2023 1000

Author: Holbrook, Tina, APRN
Filed: 02/07/23 1018
Status: Signed

Service: —
Encounter Date: 2/6/2023
Editor: Holbrook, Tina, APRN (Nurse Practitioner)

Author Type: Nurse Practitioner
Creation Time: 02/05/23 2241

Subjective

Markcus Kitchens is a 31 y.o. male who presents today for follow up

Chief Complaint: Anxiety and depression

History of Present Illness:

History of Present Illness

Markcus Kitchens presents today requesting a letter with current diagnosis as well as accommodations needed in relation to diagnosis. Verbalizes that he has a current lawsuit and needs to file an injunctive relief that is due today. Says that his lawsuit is against the National Board of Medical Examiners as he has history of ADHD that was diagnosed in childhood, but was denied ADA accommodations when testing for medical boards. Verbalizes that this testing procedure has caused issue with starting a residency program. He has been unable to apply or start a residency program due to 3 failed attempts at passing the medical board testing that is required for residency. Denies any past psychological evaluations to determine accommodations needed. He does say that he was evaluated by a psychologist during college, but declined any type of accommodation. Reports added stressor as he needs to have this lawsuit reviewed by judge that will enable him to obtain the accommodations he needs for testing. Says that he has until May 31 to get both of the tests completed in order to start residency. Says that he needs to wait until the judge's decision before scheduling these tests. Does admit to increased anxiety and depressed mood at times due to current situation, but feels as though he is handling the situation well. Continues to feel that ADHD symptoms are adequately controlled with current medication regimen. PHQ-9 total score: 11, GAD-7 total score: 18.

The following portions of the patient's history were reviewed and updated as appropriate: allergies, current medications, past family history, past medical history, past social history, past surgical history and problem list.

Past Medical History:

History reviewed. No pertinent past medical history.

Social History:

Social History

Socioeconomic History

- Marital status: Married

Tobacco Use

- Smoking status: Never
- Smokeless tobacco: Never

Vaping Use

- Vaping Use: Never used

Substance and Sexual Activity

- Alcohol use: Never

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Clinical Notes (continued)

- Drug use: Never
- Sexual activity: Yes
- Partners: Female

Family History:

History reviewed. No pertinent family history.

Past Surgical History:

Past Surgical History:

Procedure	Laterality	Date
• WISDOM TOOTH EXTRACTION	N/A	

Problem List:

Patient Active Problem List

Diagnosis

- Anxiety
- Attention deficit disorder

Allergy:

No Known Allergies

Current Medications:

Current Outpatient Medications

Medication	Sig	Dispense	Refill
• amphetamine-dextroamphetamine (ADDERALL) 20 MG tablet	Take 1 tablet by mouth 2 (Two) Times a Day.	60 tablet	0
• meloxicam (MOBIC) 7.5 MG tablet	Take 1 tablet by mouth Daily.		
• multivitamin with minerals tablet	Take 1 tablet by mouth Daily.		
• propranolol (INDERAL) 20 MG tablet	Take 1 tablet by mouth 3 (Three) Times a Day.	270 tablet	3

No current facility-administered medications for this visit.

Review of Symptoms:

Review of Systems

Constitutional: Positive for **activity change**. Negative for appetite change, fatigue, unexpected weight gain and unexpected weight loss.

Respiratory: Negative for shortness of breath.

Cardiovascular: Negative for chest pain.

Psychiatric/Behavioral: Positive for **decreased concentration**, **sleep disturbance**, **depressed mood** and **stress**. Negative



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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Clinical Notes (continued)

for suicidal ideas. The patient is not nervous/anxious.

Physical Exam:

Physical Exam

Vitals reviewed.

Constitutional:

General: He is not in acute distress.

Appearance: Normal appearance.

Neurological:

Mental Status: He is alert.

Gait: Gait normal.

Vitals:

Blood pressure 104/68, pulse 59, height 180.3 cm (71"), weight 64.9 kg (143 lb).

Mental Status Exam:

Hygiene: good

Cooperation: Cooperative

Eye Contact: Good

Psychomotor Behavior: Appropriate

Affect: Appropriate

Mood: sad, depressed and anxious

Hopelessness: Denies

Speech: Normal

Thought Process: Goal directed and Linear

Thought Content: Mood congruent

Suicidal: None

Homicidal: None

Hallucinations: None

Delusion: None

Memory: Intact

Orientation: Person, Place, Time and Situation

Reliability: good

Insight: Good

Judgement: Good

Impulse Control: Good

Lab Results:

Office Visit on 08/25/2022

Component	Date	Value	Ref Range	Status
• Report Summary	08/25/2022	FINAL		Final
<i>Comment:</i>				

TOXASSURE COMP DRUG ANALYSIS,UR

Test	Result	Flag	Units
<i>Drug Absent but Declared for Prescription Verification</i>			
<i>Amphetamine</i>	<i>Not Detected</i>	<i>UNEXPECTED</i>	<i>ng/mg creat</i>
<i>Propranolol</i>	<i>Not Detected</i>	<i>UNEXPECTED</i>	

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Clinical Notes (continued)

Test	Result	Flag	Units	Ref Range
Creatinine	25		mg/dL	>=20

Declared Medications:

The flagging and interpretation on this report are based on the following declared medications. Unexpected results may arise from inaccuracies in the declared medications.

****Note:** The testing scope of this panel includes these medications:

Amphetamine (Amphetamine-Dextroamphetamin
e)

Propranolol

For clinical consultation, please call (866) 593-0157.

EKG Results:

No orders to display

Assessment & Plan

Problems Addressed this Visit

None

Visit Diagnoses

ADHD (attention deficit hyperactivity disorder), inattentive type - Primary

Diagnoses

	Codes	Comments
ADHD (attention deficit hyperactivity disorder), inattentive type - Primary	ICD-10-CM: F90.0 ICD-9-CM: 314.00	

Visit Diagnoses:

	ICD-10-CM	ICD-9-CM
1. ADHD (attention deficit hyperactivity disorder), inattentive type	F90.0	314.00

-CPT completed on 2/3/2023, he has a total of 9 atypical T-scores which is associated with a very high likelihood of having a disorder characterized by attention deficits, such as ADHD. His profile of scores and response pattern indicates that he may have issues related to inattentiveness (strong indication), sustained attention (some indication) and vigilance (some indication).

Discussed plan of care and later needed to present for lawsuit. Discussed that a letter with current diagnosis can be provided, but any other details will need to be discussed with collaborating physician. He did obtain an office CPT, copy provided as this is a tool that he can present verifying ADHD diagnosis. Encouraged him to make an

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)****Clinical Notes (continued)**

appointment for psychological testing as this evaluation is more detailed and will recommend accommodations that may be needed. This evaluation will also rule out other psychological and/or neurological conditions that could potentially cause symptoms of impaired attention, leading to atypical scores on the Conners CPT 3. Reports that current medication regimen works well to control ADHD symptoms. Will continue with current medication regimen as previously prescribed.

- Continue Adderall 20 mg twice daily for ADHD symptoms
- Continue Propranolol 20 mg three times daily for anxiety as previously prescribed by Dr. Yin.

GOALS:

Short Term Goals: Patient will be compliant with medication, and patient will have no significant medication related side effects. Patient will be engaged in psychotherapy as indicated. Patient will report subjective improvement of symptoms.

Long term goals: To stabilize mood and treat/improve subjective symptoms, the patient will stay out of the hospital, the patient will be at an optimal level of functioning, and the patient will take all medications as prescribed. The patient/guardian verbalized understanding and agreement with goals that were mutually set.

TREATMENT PLAN: Continue supportive psychotherapy efforts and medications as indicated for patient's diagnosis. Pharmacological and Non-Pharmacological treatment options discussed during today's visit. Patient/Guardian acknowledged and verbally consented with current treatment plan and was educated on the importance of compliance with treatment and follow-up appointments.

MEDICATION ISSUES:

Discussed medication options and treatment plan of prescribed medication as well as the risks, benefits, any black box warnings, and side effects including potential falls, possible impaired driving, and metabolic adversities among others. Patient is agreeable to call the office with any worsening of symptoms or onset of side effects, or if any concerns or questions arise. The contact information for the office is made available to the patient. Patient is agreeable to call 911 or go to the nearest ER should they begin having any SI/HI, or if any urgent concerns arise. No medication side effects or related complaints today.

MEDS ORDERED DURING VISIT:

No orders of the defined types were placed in this encounter.

FOLLOW UP:

Return for Next scheduled follow up in April for medication management.

Tina Holbrook APRN FNP-C PMHNP-BO

This document has been electronically signed by *Tina Holbrook, APRN*
February 7, 2023 10:18 EST

Please note that portions of this note were completed with a voice recognition program. Efforts were made to edit dictation, but occasionally words are mistranscribed.

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus

MRN: 8912785729, [REDACTED]

Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Clinical Notes (continued)

Electronically signed by Holbrook, Tina, APRN at 02/07/23 1018



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Flowsheets

AMB PSYCH VITALS

Row Name	02/06/23 0936
Measurements	
Weight	64.9 kg (143 lb) -RF at 02/06/23 0939
Height	180.3 cm (71") -RF at 02/06/23 0939
BP	104/68 -RF at 02/06/23 0939
Pulse	59 -RF at 02/06/23 0939

Anxiety GAD - 7

Row Name	02/06/23 0941
Over the last two weeks, how often have you been bothered by the following problems?	
Feeling nervous, anxious or on edge	Nearly every day - RF at 02/06/23 0943
Not being able to stop or control worrying	More than half the days -RF at 02/06/23 0943
Worrying too much about different things	Nearly every day - RF at 02/06/23 0943
Trouble Relaxing	Nearly every day - RF at 02/06/23 0943
Being so restless that it is hard to sit still	Nearly every day - RF at 02/06/23 0943
Becoming easily annoyed or irritable	Several days -RF at 02/06/23 0943
Feeling afraid as if something awful might happen	Nearly every day - RF at 02/06/23 0943
GAD 7 Total Score	18 -RF at 02/06/23 0943
If you checked any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people	Very difficult -RF at 02/06/23 0943

Outbreak Screen

Row Name	02/06/23 0935
COVID-19 Outbreak Screening	
Do you currently have a new onset of the following	No -MH at 02/06/23 0935



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MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Flowsheets (continued)

symptoms?

In the last 10 days, have you had contact with anyone who is ill, has shown any of the symptoms listed above and/or has been diagnosed with Covid-19? This includes any immediate household member but excludes any patients with whom you have

No -MH at 02/06/23
0935

Mpox Outbreak Screening

In the last 21 days, have you been in close physical contact with anyone who is suspected or known to have the Mpox virus?

No -MH at 02/06/23
0935

Extended Care Facility Screening

Have you been a resident in a Long Term Care, Skilled Nursing, Nursing Home Facility or hospitalized outside of the United States within the past 12 months?

No -MH at 02/06/23
0935

PHQ-9 Depression Scale

Row Name 02/06/23 0941

PHQ-2/PHQ-9: Depression Screening

Little Interest or Pleasure in Doing Things 1-->several days -
RF at 02/06/23 0941

Feeling Down, Depressed or Hopeless 1-->several days -
RF at 02/06/23 0941

PHQ-2 Total Score 2 -RF at 02/06/23 0941

Trouble Falling or Staying Asleep, or Sleeping Too Much 1-->several days -
RF at 02/06/23 0941

Feeling Tired or 1-->several days -



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Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Flowsheets (continued)

Having Little Energy RF at 02/06/23 0941

Poor Appetite or Overeating 0-->not at all -RF at 02/06/23 0941

Feeling Bad about Yourself - or that You are a Failure or Have Let Yourself or Your Family Down 3-->nearly every day -RF at 02/06/23 0941

Trouble Concentrating on Things, Such as Reading the Newspaper or Watching Television 2-->more than half the days -RF at 02/06/23 0941

Moving or Speaking So Slowly that Other People Could Have Noticed? Or the Opposite - Being So Fidgety 2-->more than half the days -RF at 02/06/23 0941

Thoughts that You Would be Better Off Dead or of Hurting Yourself in Some Way 0-->not at all -RF at 02/06/23 0941

PHQ-9: Brief Depression Severity Measure Score 11 -RF at 02/06/23 0941

If You Checked Off Any Problems, How Difficult Have These Problems Made It For You to Do Your Work, Take Care of Things at Home, or Get Along with Other People? somewhat difficult - RF at 02/06/23 0941

User Key

(r) = Recorded By, (t) = Taken By, (c) = Cosigned By

Initials	Name	Effective Dates	Provider Type	Discipline
RF	Fleming, Raquel, CMA	06/16/21 -	Medical Assistant	—
MH	Hill, Megan, RegSched Rep	12/30/21 -	Staff	—

Letters

Letter by Holbrook, Tina, APRN on 2/6/2023

Status: Sent



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Letters (continued)

Letter body:



789 EASTERN BYPASS
STE 23
RICHMOND KY 40475-2421
Phone: 859-544-8171
Fax: 859-544-8197

To Whom It May Concern,

Markcus Kitchens (REDACTED) has been a patient of this clinic since 8/25/22. He has current diagnosis of ADHD, predominantly inattentive type. Any reasonable accomodations should be implemented.

Sincerely,

Tina Holbrook APRN FNP-C PMHNP-BO

Tina Holbrook, PMHNP

Messages

Your Recent Visit

From	To	Sent and Delivered
Tina Holbrook, APRN Last Read in MyChart Not Read	Markcus Kitchens	2/7/2023 10:18 AM

Hi Mr. Kitchens,

Thank you for letting us care for you during your recent visit on 2/6/2023. Please review your After Visit Summary for any pertinent instructions that may have been included by your medical provider. You can review your After Visit Summary by clicking the Visits button and then the 'View After Visit Summary' link under the applicable past visit.

Sincerely,
Baptist Health Medical Group

Appointment Reminder - Upcoming Visit

From	To	Sent and Delivered
Mychart, Generic	Markcus Kitchens	2/4/2023 7:17 AM



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Messages (continued)

Last Read in MyChart
2/6/2023 11:58 AM by Marcus Kitchens

Appointment Information

789 Eastern Bypass
Ste 23

Richmond, KY 40475-2421

Provider: Tina Holbrook, APRN

Date: 2/06/23

Appt Time: 10:00 AM

Visit Type: Medicine Check

There are 2 questionnaires available for your appointment.

epich<http://questionnairelist>[View your available questionnaires]

Please click epich<http://appointments>[here] to view more details about your appointment and check in online.

As part of our continued efforts to provide a safe environment for our patients and staff, we are offering eCheck-In via the MyChart mobile app or on a desktop. You can review and update your information, make co-payments and sign documents online up to 7 days prior to your appointment.

We ask that you arrive at least 15 minutes before your scheduled appointment.

Your safety is our first priority. If you are experiencing COVID symptoms, please call the office to discuss next steps. You may also access COVID related care using an E-Visit **epich<http://evisit>**[here] or an Urgent Care video visit option **epich<http://ondemandtelehealth>**[here] through Baptist Health MyChart.

All patients and visitors will be asked to arrive wearing a mask. Baptist Health currently has visitor restrictions in place. Please visit our website at www.BaptistHealth.com for the most up to date guidelines.

Thank you for choosing Baptist Health for your healthcare needs.

Appointment Reminder

From	To	Sent and Delivered
Mychart, Generic	Markus Kitchens	2/2/2023 7:12 AM
Last Read in MyChart		
2/6/2023 4:20 PM by Marcus Kitchens		

Appointment Information



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Messages (continued)

789 Eastern Bypass

Ste 23

Richmond, KY 40475-2421

Provider: Tina Holbrook, APRN

Date: 2/06/23

Appt Time: 10:00 AM

Visit Type: Medicine Check

There are 2 questionnaires available for your appointment.

epich<http://questionnairelist>[View your available questionnaires]

Please click epich<http://appointments>[here] to view more details about your appointment and check in online.

As part of our continued efforts to provide a safe environment for our patients and staff, we are offering eCheck-In via the MyChart mobile app or on a desktop. You can review and update your information, make co-payments and sign documents online up to 7 days prior to your appointment.

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All patients and visitors will be asked to arrive wearing a mask. Baptist Health currently has visitor restrictions in place. Please visit our website at www.BaptistHealth.com for the most up to date guidelines.

Thank you for choosing Baptist Health for your healthcare needs.

Appointment Rescheduled

From
Mychart, Generic
Last Read in MyChart
2/6/2023 5:24 PM by Marcus Kitchens

To
Marcus Kitchens

Sent and Delivered
2/1/2023 10:34 AM

Appointment information:

789 Eastern Bypass

Ste 23

Richmond, KY 40475-2421

Visit Type: Medicine Check



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Messages (continued)

Date: 2/6/2023
Dept:
Location: 789 Eastern Bypass
Ste 23
Richmond, KY 40475-2421
Provider: Holbrook, Tina, APRN
Time: 10:00 AM EST
Length: 30

Appt Status: Scheduled

Appt Instructions:

Thank you for trusting Baptist Health with your healthcare needs.

As part of our continued efforts to provide a safe environment for our patients and staff, we are offering eCheck-in via MyChart mobile app or desktop. You can review and update information and documents online up to 7 days prior to your appointment.

Your safety is our first priority. If you are experiencing COVID symptoms, please call the office to discuss next steps. You may also access COVID related care using an evisit or an Urgent Care video visit option available through Baptist Health MyChart. More information regarding virtual care options can be found on our website at:

<https://www.baptisthealth.com/services/baptist-health-virtual-care>



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Markcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents

BEHAVIORAL HEALTH - SCAN - Scan on 2/3/2023 1125: WHITE HOUSE CLINIC MEDICAL RECORDS 2/3/23

Scan (below)



Authorization for Release of Protected Health Information

Patient Name: Markcus A Kitchens

Date of Birth: [REDACTED]

Phone: (423) 314-4096

I request that my protected health information (PHI) be ☒ disclosed to ☐ obtained from: ☒ Disclosure to patient

Recipient Name: Dr. Markcus Kitchens

Address: 625 Hampton Way Apt 2 City: Richmond State: KY Zip: 40476

E-mail Address: Kitchens.Markcus@gmail.com Phone: (423) 314-4096

Fax: (healthcare provider only): _____

I authorize the following PHI to be released from my medical record(s):

☒ All Records Pertinent to Continuing Primary Care covering the period of healthcare from: 08/01/2012 to: 01/31/2023
(Please use specific dates)

I understand that my protected health information may include information related to sexually transmitted disease, acquired immunodeficiency syndrome (AIDS) or human immunodeficiency virus (HIV). It may also include information about behavioral or mental health service and treatment for drug and alcohol abuse.

Or Specify: Date Range: 08/01/2012 to 01/31/2023

☐ Exclude specific records (please specify) _____

☒ ONLY White House Clinics records

☒ Records Regarding Treatment of Specific Illness, Condition, or Injury (please specify) See other

☒ All Pharmacy Records

☒ Specific Records Regarding Behavioral Health Treatment: ☒ Treatment Plans ☒ Initial Eval ☒ Progress Notes

Specific Dates: 08/01/2012 to 01/31/2023

Reviewed and Approved by: _____

☐ Other: (please specify) _____

Purpose for Requesting Information: ☐ Legal ☐ Insurance ☒ Personal ☐ Continuation of Care ☐ Other (please specify): _____

Disclosure Format (Paper is default if not marked.):

☐ Paper (within 10 days) ☐ Fax ☒ Secure E-mail ☐ CD (within 3 business days) ☐ Patient Portal ☐ Other (please specify): _____

By signing this authorization form, I confirm I have been made aware of the rights and conditions listed on the back of this form:

[Signature]
Patient or Authorized Representative

01/31/2023

Signature Date

Markcus A Kitchens

Print Name

Relationship to Patient (if other than self) _____

Witness Signature (Verified by) _____

Witness Signature Date _____

<input type="checkbox"/> Richmond Location:	401 Highland Park Drive, Richmond, Kentucky 40475	Phone: (859) 626-7700	Fax: (859) 626-7703
<input checked="" type="checkbox"/> Berea Location:	104 Legacy Drive, Berea, Kentucky 40403	Phone: (859) 986-2323	Fax: (859) 986-7723
<input type="checkbox"/> Berea Primary Care Location:	305 Estill Street, Berea, Kentucky 40403	Phone: (859) 985-1415	Fax: (859) 985-6752
<input type="checkbox"/> McKee Location:	1010 Main Street South, McKee, Kentucky 40447	Phone: (606) 287-7014	Fax: (606) 287-3323
<input type="checkbox"/> Irvine Location:	30 Stacy Lane Road, Irvine, Kentucky 40336	Phone: (606) 723-0665	Fax: (606) 723-0680
<input type="checkbox"/> Mt. Vernon Location:	110 Progress Drive, Mt. Vernon, Kentucky 40456	Phone: (606) 256-2143	Fax: (606) 256-9762
<input type="checkbox"/> Paint Lick Location:	480 Main Street, Paint Lick, Kentucky 40461	Phone: (859) 925-2444	Fax: (859) 925-2334
<input type="checkbox"/> Lancaster Location:	89 Farra Drive, Lancaster, Kentucky 40444	Phone: (859) 792-2153	Fax: (859) 458-4038

*This is a 2-sided form

07/2020



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Immunizations Summary Report

White House Clinics
1010 Main Street South

Mc Kee, KY 40447089

Patient: Marcus Kitchens
Date of Birth: [REDACTED]
Report Date: 01/31/2023
Address: 238 Marcus Dr APT 2
Berea, KY 40403

Immunization Allergies

Allergy	Status
Egg Allergy	No
Neomycin Allergy	No
Latex Allergy	No
Gelatin Allergy	No

Immunizations:

Vaccine Group	Dose	Vaccine Status	Date Administered	Vaccine Name	Vaccine Brand
DTaP	1	Administered	03/16/1992	DTaP	
DTaP	2	Administered	05/26/1992	DTaP	
DTaP	3	Administered	07/28/1992	DTaP	
DTaP	4	Administered	05/26/1993	DTaP	
DTaP	5	Administered	02/28/1996	DTaP	
Hep A	6	Administered	04/01/2013	hep A (ped/adol, 2 dose)	
Hep B	7	Administered	11/17/1992	hep B (ped/adol, 3 dose)	
Hep B	8	Administered	12/16/1992	hep B (ped/adol, 3 dose)	
Hep B	9	Administered	03/18/1994	hep B (ped/adol, 3 dose)	
HIB	10	Administered	03/16/1992	HIB - unspecified	
HIB	11	Administered	05/26/1992	HIB - unspecified	
HIB	12	Administered	07/28/1992	HIB - unspecified	
HIB	13	Administered	05/26/1993	HIB - unspecified	
Meningococcal	14	Administered	04/07/2009	MCV4	
MMR	15	Administered	05/26/1993	MMR	
MMR	16	Administered	02/28/1996	MMR	
Polio	17	Administered	03/16/1992	OPV	
Polio	18	Administered	05/26/1992	OPV	
Polio	19	Administered	05/26/1993	OPV	
Polio	20	Administered	02/28/1996	OPV	
Polio	21	Administered	04/01/2013	polio, inactivated (IPV)	
Tdap	22	Administered	04/07/2009	Tdap (Adacel)	
Typhoid	23	Administered	06/01/2012	Typhoid, parenteral	
Yellow fever	24	Administered	04/01/2013	Yellow fever	

BAPTIST HEALTH MEDICAL
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Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)



Patient: Marcus Kitchens
Date of Birth: [REDACTED]
Date: 01/31/2023 1:06 PM
Present for: Chart Update

Active Medications

Medications prescribed prior to this visit

Medication	RX elsewhere	Directions
loperamide 2 mg capsule	Y	take 2 capsule by oral route after 1st loose stool, followed by 1 capsule after each subsequent loose stool not to exceed 16 mg/day
ondansetron 4 mg disintegrating tablet	Y	take 1 tablet by oral route every 6 hours for 2 days and place on top of the tongue where it will dissolve, then swallow

Kitchens, Marcus Z. 000000056088 [REDACTED] /31/2023 01:06 PM Page: 1/1



BAPTIST HEALTH MEDICAL
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789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)



WHITE HOUSE
CLINICS

PATIENT: Marcus Kitchens
DATE OF BIRTH: [REDACTED]
DATE: 05/25/2018 04:18 PM
HISTORIAN: self
VISIT TYPE: Office Visit
PROVIDER: Vicki Hackman, MD

This 26 year old male presents for discuss service dog.

History of Present Illness:

1. discuss service dog
back from Poland 5/11/2018
GGM passed so back a little early;
going back in the fall;
moving to chicago

had vomiting and diarrhea and seen in ER SJB;
6 episodes of vomiting;
given IV fluids
was Wednesday;
completely back to himself;
got to get more rest;

says his stress level has always been bad
getting ready to move to northern illinois;
dogs he has
Brandy is emotional service animal
Lexie is certified 11/15/2018
neither could go to Poland due to travel;

stayed here with his wife; now they are moving; ;

has paperwork
stress level always peaks; and making himself sick
was seeing colleen when he was in college here;
not taking any antidepressants
says he should still be on adderall; I sent him to lexington for evaluation;
has not been on it for awhile
taking some OTC medication bid that is to help with concentration;

has appt tuesday with cardiologists ;
Kitchens, Marcus Z. 000000056088 [REDACTED] 5/25/2018 04:18 PM 1/4



BAPTIST HEALTH MEDICAL
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789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

had been having palpitations and wore a holter

SOCIAL HISTORY (Detailed)

Tobacco use reviewed.

Preferred language is *English.

EDUCATION/EMPLOYMENT/OCCUPATION

Employment	History	Status	Retired	Restrictions
	Store manager 1 y			

MARITAL STATUS/FAMILY/SOCIAL SUPPORT

Currently single.

ALCOHOL

There is no history of alcohol use.

TOBACCO

Smoking status: Never smoker.

Use Status	Type	Smoking Status	Usage Per Day	Years Used	Total Pack Years
no/never		Never smoker			

Allergies

No known allergies.

Ingredient	Reaction	Medication Name	Comment
NO KNOWN ALLERGIES			

Reviewed, no changes.

VITAL SIGNS

HEIGHT

Time	ft	in	cm	Last Measured	Height Position	%
4:38 PM	5.0	11.00	180.34	05/25/2018	0	

WEIGHT/BSA/BMI

Time	lb	oz	kg	Context	Weight %	BMI kg/m2	BMI %	BSA m2
4:38 PM	140.20		63.594	dressed with shoes		19.55	0	

BLOOD PRESSURE

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size
4:38 PM	118/82	sitting	right	arm	manual	adult

TEMPERATURE/PULSE/RESPIRATION

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/min
4:38 PM	97.80	36.56	oral	75		18

Kitchens, Marcus Z. 000000056088 05/25/2018 04:18 PM 2/4



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

PULSE OXIMETRY/FIO2

Time	Pulse O ₂ (Rest %)	Pulse O ₂ (Amb %)	O ₂ Sat	O ₂ L/Min	Timing	FIO ₂ %	L/min	Delivery Method	Finger Probe
4:38 PM	99								

MEASURED BY

Time Measured by
4:38 PM Hazel Bray, CMA

Physical Exam

Exam	Findings	Details
General Exam	Comments	tall thin in NAD
Psychiatric	Normal	Orientation - Oriented to time, place, person & situation. Appropriate mood and affect.

Completed Orders (this encounter)

Order	Details	Reason	Side	Interpretation	Result	Initial Treatment Date	Region
PHQ-9 completed				Mild depression	7		

Assessment/Plan

#	Detail Type	Description
1.	Assessment	Attention-deficit hyperactivity disorder, unspecified type (F90.9).
	Plan Orders	Referrals: Mental Health Counselor. Evaluate and treat.
2.	Assessment	Anxiety (F41.9).
3.	Other Orders	Orders not associated to today's assessments.
	Plan Orders	The patient had the following procedure(s) completed today PHQ-9 completed..

Status	Ordered	Order	Timeframe	actComments
ordered	05/25/2018	Referrals: Mental Health Counselor. Evaluate and treat		please evaluate and give opinion about the need for emotional service dogs;

Medications (Added, Continued or Stopped this visit)

Started	Medication	Directions	Instruction	Stopped
	loperamide 2 mg capsule	take 2 capsule by oral route after 1st loose stool, followed by 1 capsule after each subsequent loose stool not to exceed 16 mg/day		
	ondansetron 4 mg disintegrating tablet	take 1 tablet by oral route every 6 hours for 2 days and place on top of the tongue where it will dissolve, then		

Kitchens, Marcus Z. 000000056088 05/25/2018 04:18 PM 3/4



BAPTIST HEALTH

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

swallow

Provider: Vicki Hackman MD 05/25/2018 05:05 PM

Vicki F. Hackman MD.

Document generated by: Vicki Hackman 05/25/2018 05:05 PM

Electronically signed by Vicki Hackman MD on 05/27/2018 12:11 PM

Kitchens, Marcus Z. 000000056088 05/25/2018 04:18 PM 4/4



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)



WHITE HOUSE
CLINICS

PATIENT: Marcus Kitchens
DATE OF BIRTH: [REDACTED]
DATE: 07/26/2017 09:21 AM
HISTORIAN: self
VISIT TYPE: Office Visit
PROVIDER: Vicki Hackman, MD

This 25 year old male presents for med refill.

History of Present Illness:

1. med refill
last seen 2/2016;
finished 1st year of med school; working with daniel lee in richmond and leaves in september to go back; has 1 more
year there at basic science and 2 y of clinical;
on adderall since 2014;
says he was focusing better on adderall;

Allergies

No known allergies.

Ingredient	Reaction	Medication Name	Comment
NO KNOWN ALLERGIES			

Reviewed, no changes.

VITAL SIGNS

Time	BP	Pulse	Resp	Temp	Ht ft	Ht in	Ht cm	Wt lb	Wt oz	Wt kg	Weight %	BMI kg/m ²	BMI %	BSA m ²	O ₂ Sat%
9:30 AM	100/62	73	18	97.50	5.0	11.00	180.3	140.00		63.503		19.53	0		98

MEASURED BY

Time Measured by
9:30 AM Hazel Bray, CMA

Kitchens, Marcus Z. 000000056088 [REDACTED] 07/26/2017 09:21 AM 1/3

**BAPTIST HEALTH MEDICAL
 GROUP BEHAVIORAL
 HEALTH
 789 EASTERN BYPASS STE
 23
 RICHMOND KY 40475-2421**

Kitchens, Marcus
 MRN: 8912785729,
 Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
 (continued)**

Documents (continued)

Physical Exam

Exam	Findings	Details
Psychiatric	Normal	Orientation - Oriented to time, place, person & situation. Appropriate mood and affect.

Assessment/Plan

#	Detail Type	Description
1.	Assessment	Attention and concentration deficit (R41.840).
	Provider Plan	is asking me to write an rx for adderall; he is leaving for poland in september; He says poland does not prescribe adderall for ADHD but was told if he had an MD here to write a letter, he could get it there. I told him I could not do that but I could refer him to a specialist for evaluation and get their opinion about him needing the medication. He was not happy with this; says he was seeing colleen and then Dr David was writing his rx and he brought in a bottle dated 2016 as last rx.
	Plan Orders	Referrals: Psychiatry. Evaluate and treat.

Status	Ordered	Order	Timeframe	actComments
ordered	07/26/2017	Referrals: Psychiatry. Evaluate and treat		needs evaluated for ADHD; is going overseas in september and has been on adderall in past; please evaluate ; needs recommendations and treatment

Provider: Vicki Hackman MD 07/26/2017 10:00 AM

Vicki Hackman MD

Document generated by: Vicki Hackman 07/26/2017 10:00 AM
 Kitchens, Marcus Z. 000000056088 07/26/2017 09:21 AM 2/3



BAPTIST HEALTH®

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729, [REDACTED]
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Electronically signed by Vicki Hackman MD on 07/26/2017 12:59 PM

Kitchens, Marcus Z. 000000056088 [REDACTED] 07/26/2017 09:21 AM 3/3

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
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789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)



PATIENT: Marcus Kitchens
DATE OF BIRTH:
DATE: 02/15/2016 09:24 AM
HISTORIAN: self
VISIT TYPE: Office Visit
PROVIDER: Vicki Hackman, MD

This 24 year old male presents for School PE and ROS.

History of Present Illness:

1. School PE
says he is here for medical school physical; was here 2014 for same thing with colleen ambrose

going to Hope Medial,
going to study abroad Medical school in Poland
lives in berea;
finished college 2014.

reviewed forms with patient;
recently had PPD but not in the past; always negative PPD:
2. ROS

PAST MEDICAL/SURGICAL HISTORY (Detailed)

Disease/disorder	Onset Date	Management	Date	Comments
ADD				
wisdom teeth removal				

Family History (Detailed)

Patient reports there is no relevant family history.

SOCIAL HISTORY (Detailed)

Tobacco use reviewed.

Preferred language is "English."

Kitchens, Marcus Z. 000000056088 02/15/2016 09:24 AM 1/4

BAPTIST HEALTH MEDICAL
 GROUP BEHAVIORAL
 HEALTH
 789 EASTERN BYPASS STE
 23
 RICHMOND KY 40475-2421

Kitchens, Marcus
 MRN: 8912785729,
 Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
 (continued)

Documents (continued)

EDUCATION/EMPLOYMENT/OCCUPATION

The patient has a(n) college education.

Employment	History	Status	Retired	Restrictions
	Store manager 1 y			

MARITAL STATUS/FAMILY/SOCIAL SUPPORT

Currently single.

ALCOHOL

There is no history of alcohol use.

Social History:

Tobacco use reviewed.

Reviewed, no changes. Last detailed document date: 02/15/2016.

Allergies

No known allergies.

Ingredient	Reaction	Medication Name	Comment
NO KNOWN			

ALLERGIES

Reviewed, no changes.

VITAL SIGNS

Time	BP	Pulse	Resp	Temp	Ht ft	Ht in	Ht cm	Wt lb	Wt kg	Weight	BMI	BMI	BSA	O2
	mm/Hg	/min	/min	F						%	kg/m2	%	m2	Sat%
9:29 AM	96/54	66	12	97.70	5.0	11.00	180.34	139.00	63.049		19.39	0		98

Source	Oxygen	O2 Ambient	Measured
RA			

MEASURED BY

Time	Measured by
9:29 AM	Linda Mills, CMA

Kitchens, Marcus Z. 000000056088 02/15/2016 09:24 AM 2/4



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
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789 EASTERN BYPASS STE
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RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Physical Exam

Exam	Findings	Details
Ears	-	Canal - Right: excess cerumen, Left: excess cerumen.
Ears	Normal	Inspection - Right: Normal, Left: Normal.
Nasopharynx	Normal	Lips/teeth/gums - Normal. Oropharynx - Normal.
Neck Exam	Normal	Inspection - Normal. Palpation - Normal. Thyroid gland - Normal.
Lymph Detail	Normal	No cervical or supraclavicular adenopathy.
Respiratory	Normal	Inspection - Normal. Auscultation - Normal. Effort - Normal.
Cardiovascular	Normal	Regular rate and rhythm. No murmurs, gallops, or rubs.
Abdomen	Normal	Inspection - Normal. Auscultation - Normal. No abdominal tenderness. No hepatic enlargement.
Musculoskeletal	Normal	Visual overview of all four extremities is normal.
Extremity	Normal	No edema.
Neurological	Normal	Memory - Normal. Cranial nerves - Cranial nerves II through XII grossly intact.
Psychiatric	Normal	Orientation - Oriented to time, place, person & situation. Appropriate mood and affect. Normal insight. Normal judgment.

Immunizations

Immunizations reviewed this visit.

Assessment/Plan

#	Detail Type	Description
1.	Assessment Plan Orders	Encounter for general adult medical examination without abnormal findings (Z00.00). CBC with Diff to be performed Today. CMP to be performed Today and SED rate, automated to be performed Today.
2.	Assessment Plan Orders	Screening for Hep C (Z11.59). Hep B Surface Ab, Qual (499) to be performed Today, Hep B Surface Ag to be performed Today and Hep C AB W/ Ref to Hep C Virus RNA, Quan, R-T PCR (914368) to be performed Today.
3.	Assessment Plan Orders	Screening for HIV (human immunodeficiency virus) (Z11.4). HIV Ab to be performed Today.
4.	Assessment Plan Orders	Encounter for screening for respiratory tuberculosis (Z11.1). Further diagnostic evaluations ordered today include(s) XRAY, CHEST (2 VIEWS) to be performed.

Status	Ordered	Order	Timeframe	actComments
ordered	02/15/2016	CBC with Diff	Today	
ordered	02/15/2016	CMP	Today	
ordered	02/15/2016	SED rate, automated	Today	
ordered	02/15/2016	XRAY, CHEST (2 VIEWS)		
ordered	02/15/2016	HIV Ab	Today	
ordered	02/15/2016	Hep C AB W/ Ref to Hep C Virus RNA,	Today	

Kitchens, Marcus Z. 000000056088 02/15/2016 09:24 AM 3/4

BAPTIST HEALTH MEDICAL
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789 EASTERN BYPASS STE
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RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

ordered	02/15/2016	Quan, R-T PCR (914388)	Today
ordered	02/15/2016	Hep B Surface Ab, Qual (499)	Today
		Hep B Surface Ag	Today

Medications (Added, Continued or Stopped this visit)

Started	Medication	Directions	Instruction	Stopped
	Adderall 20 mg tablet	take 1 tablet by oral route every day before breakfast		02/15/2016

Provider: Vicki Hackman MD 02/15/2016 10:10 AM

Document generated by: Vicki Hackman 02/15/2016 10:10 AM

Electronically signed by Vicki Hackman MD on 02/15/2016 09:11 PM

Kitchens, Marcus Z. 000000055088 02/15/2016 09:24 AM 4/4



BAPTIST HEALTH MEDICAL
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789 EASTERN BYPASS STE
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Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)



WHITE HOUSE
CLINICS

PATIENT: Marcus Kitchen
DATE OF BIRTH: [REDACTED]
DATE: 07/08/2014 1:07 PM
HISTORIAN: self
VISIT TYPE: Office Visit
PROVIDER: Colleen Ambrose APRN

Chief Complaint

1. physical

History of Present Illness

This 22 year old male presents with:

1. physical

Mr. Kitchen presents today for a PE clearance to attend medical school. His PMH consists of ADD which is treated by meds. only surgery has been removal of his wisdom teeth. He is otherwise healthy.

Past Medical/Surgical History:

Condition

Year Procedure/Surgery

Year

ADD

wisdom teeth removal

Family History

Patient reports there is no relevant family history.

Social History

Primary language is *English.

Marital Status / Family / Social Support:

Currently single.

Tobacco:

Smoking status: Never smoker.

Use Status Total Pk Yrs Type

Per Day Years Used Pack Years Year Quit

never

Tried To Quit Longest Tob Free

Relapse Reason

Passive Exposure

Alcohol:

There is no history of alcohol use.

Social History:

Reviewed, no changes. Last detailed document date: 07/08/2014.

Allergies

No known allergies.

Reviewed. No changes.



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Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Review of Systems

Constitutional:

Negative for fever, night sweats, weight gain and weight loss.

HEENT:

Negative for hearing loss and sore throat.
Negative for eye pain and vision changes.

Respiratory:

Negative for chronic cough, cough and known TB exposure.

Cardiovascular:

Negative for chest pain and edema.

Gastrointestinal:

Negative for abdominal pain, blood in stool, change in stool pattern, constipation, nausea and vomiting.

Genitourinary:

Negative for dysuria.

Neuro/Psychiatric:

Negative for anxiety and depression.
Negative for extremity weakness, memory impairment, numbness in extremities and seizures.

Musculoskeletal:

Negative for back pain, joint pain and muscle weakness.

Hematology:

Negative for easy bleeding.

Immunology:

Positive for:

- Seasonal allergies.

Vital Signs

<u>Ht Ft</u>	<u>Ht In</u>	<u>Wt Lb</u>	<u>Wt Oz</u>	<u>Wt Kg</u>	<u>BMI kg/m2</u>	<u>BMI%</u>
5.0	11.00	135.00		61.235	18.83	

<u>BP mm/Hg</u>	<u>Pulse/min</u>	<u>Resp/min</u>	<u>Temp F</u>	<u>Head Circ In</u>
104/74	82	12	98.8	

<u>Pulse O₂ Rest %</u>	<u>Pulse O₂ Amb %</u>	<u>O₂ LPM</u>	<u>BSA m2</u>
99			

Measured By

Time
1:14 PM Regina Cox, CMA

Physical Exam

Constitutional:

Well developed.

Eyes:

Right

PERRLA.

Left

PERRLA.

Ears:

Right

Normal tympanic membrane. Hearing grossly intact.

Left



BAPTIST HEALTH MEDICAL
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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Normal tympanic membrane. Hearing grossly intact.

Nose / Mouth / Throat:

External Nose: is unremarkable

Lips/Teeth/Gums: Normal teeth and gums

Tonsils: No tonsillar hypertrophy or exudates

Oropharynx: No pharyngeal erythema or exudates or mucosal lesion

Neck / Thyroid:

No thyromegaly or thyroid nodules detected.

Respiratory:

Lungs clear to auscultation.

Cardiovascular:

Extra Sounds: None.

Rate and Rhythm: Heart rate is regular. Rhythm is regular.

No edema is present.

Vascular:

Pulses

Dorsalis pedis pulses: normal. Capillary refill is: less than 2 seconds.

Varicosities are absent

Abdomen:

There is no abdominal tenderness.

No hepatic enlargement.

No splenic enlargement.

Integumentary:

No impressive skin lesions present.

Musculoskeletal:

Normal range of motion, muscle strength, and stability in all extremities with no pain on inspection.

Extremities:

Dorsalis pedis pulses: normal.

Monofilament exam is normal.

No edema is present.

No ulceration present.

No cyanosis.

No calf tenderness. Varicosities are absent

Toenails: Normal.

Neurological:

Memory: Intact.

Cranial nerves: grossly intact

Sensory: No sensory loss.

Deep Tendon Reflexes: DTR's preserved and symmetric.

Psychiatric:

The patient is oriented to time, place, person, and situation.

The patient demonstrates the appropriate mood and affect.

Assessment/ Plan

Well adult exam (V70.0)

Comments:

Advise him to get PPD placed as we cannot find one. He can contact his school and see if they need one. He has a negative TB risk assessment. He will call his school to see if they need a TB skin test

ADD (attention deficit disorder) (314.00)

advised he will have to find a local provider to treat his ADD there.

~~Medications (added, continued or stopped this visit)~~

Continued:

Prescribed Elsewhere:

Medication Name

Adderall 20 mg tablet

Reason

take 1 tablet by oral route every day before breakfast

BAPTIST HEALTH MEDICAL
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23
RICHMOND KY 40475-2421

Kitchens, Marcus

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Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Provider: Colleen Ambrose APRN 07/09/2014 2:21 PM

Document generated by: Colleen Ambrose 07/09/2014 2:21 PM

305 Estill Street
Berea, KY 404031742
(859)985-1415

Electronically signed by Colleen Ambrose APRN on 07/10/2014 11:10 AM



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

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Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

Electrographically Signed By: Markman, Viki MD 05/27/2018 12:35:23 PM

Page 1 of 1

BioTel Heart		10255 W. Higgins Road, Rosemont, IL 60018 1-877-774-9346 x 2274																																																																																																																													
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PATIENT DEMOGRAPHICS																																																																																																																															
Last Name	Kitchens	Physician	Markman, Viki																																																																																																																												
First Name	Marcus	Ordered By	Supra Gupta, CCT																																																																																																																												
Middle Initial	Z	Reading Physician	Abdulhadi, Nohoud																																																																																																																												
ID Number	6490220	Test Date	02/22/2018																																																																																																																												
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pt address	230 Mistral Drive #2	pt ins. address																																																																																																																													
city, st, zip	Berea, Ky 40403	city, st, zip																																																																																																																													
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Holter Report
Serial #: 17940

3408



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Markcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

Electronically Signed By: Hackman, Vicki MD 05/24/2018 01:15:11 PM

Circle or check appropriate, check all that apply.

KentuckyOne Health®
EMERGENCY PROVIDER RECORD
+ Syncope / Near-Syncope +
AAA / AHA / TIA / Atrial Fibrillation / GI Bleed

TIME SEEN: 12:19 ROOM: _____ EMS Arrived _____
HISTORY: Current family EHS _____
UNABLE TO OBTAIN HISTORY DUE TO: _____

HPI
chief complaint: binging (fries-fainting)
witnessed? no (yes by family friend (witnessed))
time / onset / duration: 8:30 min / hrs / days ago
last known well date: _____ time: _____
single episode occurred _____
multiple episodes (if) yes logon _____
most recent episode: _____

context / position / activity at time of episode(s):
sitting
lying down
standing
driving
other
symptoms occurring just prior to episode(s):
none chest pain palpitations
lightheaded nausea flushing
visual changes blurred vision back pain
duration of PRECEDING symptoms: 1-2 min

character of event(s):
loss of consciousness
collapse / lost consciousness / became unresponsive
seizure activity observed _____
focal _____ tonic _____ tonic-clonic _____
duration of LOC: _____ sec / min / unknown
confused after event _____
awoke and alert after becoming supine _____
incontinence of urine / stool _____
breathing shallow / stopped _____
last pulse _____ / phon DSA PTA _____
last stick low PTA () / phon DSA PTA _____

location of injury: head
head neck face mouth tongue chest abdomen back
RUE LUE RLE RLE
associated symptoms:
none (back to normal)
chest pain _____
shortness of breath _____
abdominal pain _____
generalized RUQ LUQ RLQ LLQ _____
headache _____

similar symptoms previously _____
previous diagnosis / test / workup for this problem _____
recently seen / treated by doctor / hospitalized _____

ROS
COMET recent illness / fever _____ sore throat / dental problems _____
CVS (see HPI) _____ MS _____
RESP _____ joint pain _____
cough _____ SKIN _____
EYES _____ rash _____
problems with vision _____ LYMPH _____
GI _____ swollen glands _____
diarrhea _____ shingles swelling (R/L) _____
black stools / bloody _____ NEURO _____
GI _____ confusion / dementia _____
problems urinating _____ PSYCH _____
LHMP _____ preg post-menop _____ anxiety / depression _____
irregular / missed period(s) _____ All systems negative except as marked

• COMET / EYES / MS / CVS / RESP / GI / NEURO components also addressed in HPI

PAST HX no chronic diseases
RELATED PAST HX: diabetes Type 1 Type 2
aneurysm CNS abdomen chest diets / diet / insulin neuropathy
CVA / TIA blood deficit (R/L) GI disease hepatitis
seizure disorder _____ hypercalcemia _____
cardiac disease _____ immunosuppressed AIDS _____
AFib angina CAD MI lung disease asthma COPD
DVT / PE risk factors: cast cancer
recent surgery leg swelling bedridden
polypharmacy DVTPE
old records reviewed / summary _____

Surgery / Procedures none
any recent surgery _____
hysterectomy / BTL / C-section _____
appendectomy _____ pacemaker / defibrillator _____
CABG / CAB / stent _____ tonsillectomy _____
cardiac endarterectomy _____
cholecystectomy _____

Imaging prior CT / MRI / US date _____

☐ Immunization UTD

Medications: none (see nurses note) Allergies NRDA
ASA clopidogrel warfarin LMWH _____ see nurses note
NSAIDs acetaminophen BCP _____ antibiotic _____
chronic meds _____ IV contrast _____

SOCIAL HX productive / prod / never / past / quit _____ ago
single / single (recent / heavy / occasional)
Occupation _____
Living situation: alone family friend group care facility _____

FAMILY HX sudden cardiac death
DVTPE seizures _____

KITCHENS JR, MARKCUS ZWANZ
BR010190601 TALBOT, TIMOTHY S
DOB: _____ M 20
8200195205 05/21/18



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729, [REDACTED]
Visit date: 2/6/2023

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02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

<input type="checkbox"/> Patient Assessment Reviewed <input type="checkbox"/> Initial Vital Signs Reviewed <input type="checkbox"/> Telemetry BP: 117/63 HR: 85 RA: 18 Temp: 98.5 Pulse Ox: 92% BA: 0% Interm: nml Hypoxic:		NEURO higher functions alert oriented to person of acute CVA and speech / cognition		GCS: disoriented for person place time situation abnormal response to commands no response eyes open slow inappropriate aphasia expressive / receptive speech / cognition abnormalities abnormal response to pain withdrawn flexor extensor none	
PHYSICAL EXAM EXAM LIMITED BY: General Appearance appears well alert mild / moderate / severe distress anxious / lethargic		cranial nerves nml (2-12) cerebellar nml as tested		ECM palsy (R/L) facial droop (L/R) tongue deviation (to R/L)	
HEENT head / scalp / neck normal inspection normal normal ENT inspection blue / pink nml		tenderness / swelling / ecchymosis scleral icterus / pale conjunctivae unequal pupils R mm L mm nasal septal hematomas pharyngeal erythema / exudate hemotympanum (R/L) dental decay Dry Mouth		abnormal Romberg test abnormal finger-nose-finger (R/L) abnormal gait	
NECK / BACK neck supple normal / tender no carotid bruit		cerv. lymphadenopathy carotid bruit (R/L) neck / back tenderness		sensorimotor no motor deficit sensation nml	
RESPIRATORY no respiratory distress hyperinflation nml no pleuritic chest pain		respiratory distress wheezes / rales / rhonchi (R/L)		weakness sensory deficit pronator drift (R/L) abnormal reflexes clonus (R/L) tremor	
CVS regular rhythm heart sounds nml no S3 / S4 / equal		irregularly irregular rhythm extrasystoles (occasional / frequent) tachycardia / bradycardia JVD present murmur grade /6 syst / diast gallop (S3 / S4) decreased pulse (R/L)		depressed mood / flat affect irritable / restless / combative	
ABDOMEN / GI non-tender no organomegaly		tenderness generalized RUQ LUQ RLQ LLQ hepatomegaly splenomegaly bruit		mood / affect nml cooperative, interactive	
RECTAL home neg stool		home positive stool trace		SKIN color nml, no rash normal dry intact cyanosis / diaphoresis / pallor skin rash / embolic lesions pressure ulcer location depth / stage: 1 2 3 4	
EXTREMITIES no tenderness nml ROM no pedal edema		pedal edema (R/L) calf tenderness (R/L) homans sign / cords (R/L)		PROGRESS <input type="checkbox"/> see additional template # 94 S/E Time unchanged improved re-examined	

Synopsis - 48 Pg 2 of 4 MR-199 Rev. 09/15

KITCHENS, JR, MARKUS ZWANZ
BK0001988603 TALBOT, TIMOTHY S
DOB: [REDACTED] M 26
B2D0195205 05/23/18

TELETYPE UNIT 10-10-10
SYSTEM © 2014 - 2015 T-System, Inc.

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

XRAYS / CT

CXR
Interpretation: _____
Interpreted by ED provider unless noted otherwise
____ and / NAD ____ no hfrates ____ mm heart size ____ mm mediastinum
absent

Hegd CT / MRI
Interpretation: _____
Interpreted by ED provider unless noted otherwise
____ and / NAD
absent

LABS *Normal lab values ranges are included on the original lab report			
CBC	Chemistries	CKMB	UA
Hgb	normal except	Troponin	normal except
WBC	Glu 126	D-Dimer	
Hgb	Na	NR	
Hct	K	IT /PTT	
Platelets	BUN		Preg Test +
Ser	Crak (1.33)		
ABG c/s:			
RA /	LO ₂ pH	pCO ₂	pO ₂ COHb
Pulse Ox	% on RA /	LO ₂ at rest and /w/pos	Time

EKG

RHYTHM STRIP Rate: _____ Rhythm: NSR _____

EKG interpreted by RN provider unregistered otherwise

_____ RNAD _____ RNJLCPJL _____ RNJLZL _____ RNJLST _____ RNJLST

Rate: 73 Rhythm: NSR sinus each 4-6b

_____ RNJLST _____ RNJLST _____ RNJLST _____ RNJLST

not changed from: _____ repeat EKG: unchanged from _____

Postural/Vitals	
lying: BP _____	HR _____
sitting: BP _____	HR _____
standing: BP _____	HR _____

PROGRESS - Continued

☐ See # 44001 on page # 91 SLA

Time _____ unchanged _____ Improved _____ re-examined _____

+ CVA - 1-PA given

+ AMI - EKG / ASA / Thrombolytics / transfer

+ A-fib / A-f flutter - 2 18 /y oral anticoagulant / link access

+ BP Screen - 2 18 /y / screening / follow up documented

_____ invasive evaluations refused / not eligible / not indicated / contraindicated
not available

☐ patient ambulating / transferring as pre-event baseline

Discharge Vx BP _____ HR _____ RR _____ Temp _____

Discussed with Dr. _____ Time: _____

Will see patient in: ID / hospital / office

Counselled patient / family regarding: Additional history from _____

lab / med. results discuss need for follow up family caretaker parameters _____

_____ prior records received holding orders written _____

Rx given Suhm / Kephente

Critical Care (excluding time for other separate services)

TIME _____ 30-74 min 75-104 min _____ min

[illegible]

Disposition Time 6:30 PM
DISPOSITION: ☐ Home L. ☐ Suburban ☐ CBS ☐ Deceased
☐ AMVA (see AMVA template 117) ☐ Transferred
COMMENTS: ☐ unchanged ☐ Improved ☐ stable
_____, is preperitoneal Appendectomy & referred to POP for SP evaluation in one week
Care transferred to _____ MD / EO / MLP Time: _____
☐ Have performed this check and agree with the documentation as recorded by the TPO, including the assessment, treatment plan, and disposition.
☐ I have not performed and cannot verify this patient is in compliance with the TPO and up to and including management and disposition of this patient.

N/A/P (Date/Time) I/OX # _____

MA/DO _____ (Date/Time) I/OX # _____
☒ Template Complete ☐ See Addendum (Deleted or Template A)
Syncope - 48 Pg 3 of 4 MR - 139 Rec. 09 / 15 * Repeatable Process

KITCHENS JR. MARKUS ZWANZ
800001008603 TALDOT, MURPHY S
DOB [REDACTED] M 28
02/01/1952/05 05/23/18
[REDACTED]



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

For documentation purposes only:

CHADS ₂ Score:	Pts
congestive heart failure	1
hypertension	1
age ≥ 75 yr	1
diabetes mellitus	1
prior stroke or TIA or thromboembolism	2
Low: 0pts Mod: 1pt High: 3 or >	

Clin. OP & A. Validation of Clinical Quality Score Scheme for Primary Care, JGIM 2001;16(5):351-359

Disposition Decision

Decision made at: _____ Lok Dept to: _____

Basis For Discharge Decision:

pt condition: stable improved unchanged
ambulatory: active
drinking fluids: eating
pain controlled:

pt status: stable improved unchanged
alert, oriented:

spox status: no abnrm to serious abnrm
mild abnrm mod abnrm

social support: adequate good excellent

follow up: available arranged discussed w/ physician

Basis For Admit Decision:

admit to: further evaluation IV hydration
add'l testing IV medication
monitoring IV antibiotics
telemetry labwork results
pain control surgery / intensive care

PROGRESS - Continued

☐ see additional template if 94 57a
From: _____ unchanged improved re-examined

☐ I have reviewed the chart and agree with the documentation as recorded by the M.P., including the assessment, treatment plan, and disposition.
☐ I personally evaluated and examined the patient in conjunction with the M.P. and agree with the management and disposition of the patient.

(Date/Time) (Signature)

(Date/Time) (Signature)

☐ Template Complete ☐ See Addendum (Date/Time) (Signature)

KITCHENS JR, MARCUS ZWANNZ

89001300803 FAULT, INHIBIT, S

DOB: 02/01/195205 H 26 05/23/18

02/01/195205 05/23/18

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BAPTIST HEALTH MEDICAL
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789 EASTERN BYPASS STE
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RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

ED Nursing Record
* Final Report *

Kitchens JR, Marcus Zwan - BZ00195205

Result Type: ED Nursing Record
Result Date: May 23, 2018 12:13 EDT
Result Status: Auth (Verified)
Result Title: BBK Triage ED
Performed or Dictated: Schwarz, Sherry R on May 23, 2018 12:13 EDT
Verified By: Schwarz, Sherry R on May 23, 2018 12:13 EDT
Encounter info: BK0001908603, BBK SAINT JOSEPH, Emergency, 5/23/2018 - 5/23/2018

*** Final Report ***

BBK Triage ED Entered On: 5/23/2018 12:19 EDT
Performed On: 5/23/2018 12:13 EDT by Schwarz, Sherry R

Triage Assessment
Triage Date/Time: 5/23/2018 12:13 EDT

Schwarz, Sherry R - 5/23/2018 12:13 EDT

DCP GENERIC CODE
Tracking Acuity: 2 - Emergent BBK
Tracking Group: BBK St. Joseph

Schwarz, Sherry R - 5/23/2018 12:13 EDT

ED Visit Reason: N and/or V
Primary Care Provider: HACKMAN, VICKI
Accompanied By: No One
Arrival Mode: Private vehicle

Chief Complaint: PT. PRESENTS TO ER REPORTS HE WAS AT THE HEART CENTER TODAY BECAUSE OF TACHYCARDIA. REPORTS HE ALMOST PASSED OUT. C/O NA/D REPORTS 6 EPISODES OF VOMITING AND TWO EPISODES OF DIARRHEA. DENIES FEVER, REPORTS HAS BEEN OUT OF THE COUNTRY RETURNED HOME TWO WEEKS AGO

Schwarz, Sherry R - 5/23/2018 12:13 EDT

Health History ED Grid

Alcohol Use: No
Caffeine Use: Yes
Substance Abuse: No
Tobacco Use: No
Asthma/COPD: No
Cancer: No
CVA/TIA: No
Mental Illness: No
Dementia: No
Diabetes: No
General Cardiac: No
GI Medical History: No
Gyn Hx: No

Printed by: Ramsey, Sabrina A, HIM Clerk
Printed on: 5/24/2018 10:36 EDT

Page 1 of 3
(Continued)



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

ED Nursing Record
* Final Report *

Kitchens JR, Markcus Zwanz - BZ00195205

Heart Attack : No
Heart Failure : No
High Blood Pressure : No
High Cholesterol : No
Liver Disease : No
Renal : No
Seizure : No
Surgical History : No
Thyroid Disease : No
AIDS/HIV : No
MRSA : No
Tuberculosis : No
VRE : No
Other Medical History : Yes, hx pneumonia
Pathway Planning : No

Schwarz, Sherry R - 5/23/2018 12:13 EDT

Temp : 98.9 Deg F(Converted to: 37.2 Deg C)
Temp Route : Oral/Mouth
Systolic Blood Pressure : 117 mmHg
Diastolic Blood Pressure : 63 mmHg
Pulse Rate : 86 bpm
Respiratory Rate : 18 Breaths/Min
Oxygen Saturation : 100 %
Pain Symptoms : No
Height/Weight Med Rec : Open
Medication Profile, Med Rec : Open
Allergy Profile, Med Rec : Open
Workman's Compensation : No
Preferred Communication Mode : Verbal
Languages : English
Child/Parent Domestic Concerns : None
Threats of Suicide : No

Schwarz, Sherry R - 5/23/2018 12:13 EDT

Height and Weight
Height Source : Stated
Height Entry Format : Imperial
Height, Inches : 71 Inch(Converted to: 5 ft 11 Inch, 180.34 cm)
Clinical Height : 180.34 cm
Weight Source : Stated
Type of Weight Measurement Est : Imperial
Weight, est lb : 145 lb
Estimated Clinical Dosing Weight : 65.91 kg
Ideal Body Weight : 74 kg
Body Surface Area Estimated : 1.82 m2
Body Mass Index Estimated : 20.27 kg/m2

Schwarz, Sherry R - 5/23/2018 12:13 EDT

Medication List ED
Medications Reviewed : Yes
Source of Information : Patient

Schwarz, Sherry R - 5/23/2018 12:13 EDT

Medication List

(As Of: 5/23/2018 12:19:27 EDT)

Printed by: Ramsey, Sabrina A, HIM Clerk
Printed on: 5/24/2018 10:36 EDT

Page 2 of 3
(Continued)

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
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RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

ED Nursing Record
* Final Report *

Kitchens JR, Marcus Zwanz - BZ00195205

Allergy Profile

(As Of: 5/23/2018 12:19:27 EDT)

Allergies (Active)
No Known Allergies

Estimated Onset Date: Unspecified ; *Created By:* AGEE,
MELISSA K; *Reaction Status:* Active ; *Category:* Drug ;
Substance: No Known Allergies ; *Type:* Allergy ; *Updated By:*
AGEE, MELISSA K; *Reviewed Date:* 1/29/2015 12:05 EST

Signature Line

Request for Electronic Authentication By:

Schwarz, Sherry R Electronically Authenticated On: 05/23/2016 12:13 PM

Printed by: Ramsey, Sabrina A, HIM Clerk
Printed on: 5/24/2018 10:36 EDT

Page 3 of 3
(End of Report)



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

Berea Hospital Emergency Department

Patient ID: BK0001590885
Patient Name: KITCHENS, MARKCUS Age: 20 Sex: M
Registration Date: 06/30/2012 1649
Chief Complaint:
Medical Record Number: 8200195205
Time Seen by clinician: 17:14

The patient arrived via private automobile.
The patient's condition upon arrival was fair.

HPI: The patient presents with pain to the left lower rib cage that occurred approximately 2 weeks prior to arrival. There are no reported additional injuries which occurred at the same time. There has been no difficulty in breathing. There has been no radiation of the pain. There has been no abdominal pain. There is no known previous injury to the affected area. He denies injury, he states that when u rub over the area you can hear a pop. He also states that he has to strain to have a bowel movement and doesn't have regular bowel movements

PMH: Negative for significant medical problems contributing to this complaint.
PRIOR SURGERY: No previous significant surgical procedures.

CURRENT MEDICATIONS: See chart.
ALLERGIES: See chart.

PFSS: The patient lives with their family. The patient lives in the local area. The patient is a non-smoker. The patient has no history of alcohol abuse. There is no family history that is pertinent to the present complaint.

REVIEW OF SYSTEMS: See HPI for pertinent systems.

All other systems negative; except as noted.

PHYSICAL EXAM: Vitals Signs: See chart. The patient is alert and cooperative.

The patient is in no respiratory distress.

NECK: Supple, nontender, no lymphadenopathy.

CHEST: No tenderness. No crepitus. No ecchymosis. There is no subcutaneous emphysema.

LUNGS: Clear to auscultation and breath sounds equal.

HEART: Regular rate and rhythm. No murmurs, gallops or rubs.

ABDOMEN: No distension. Normal bowel sounds. No bruits present. No tenderness. No guarding. No rebound. No mass is palpable. There is no hepatosplenomegaly. There is no tenderness over McBurney's point. No flank tenderness.

BACK: No significant vertebral tenderness or spasm.

NEUROLOGICAL: Alert and cooperative. Sensory and motor functions intact.

The patient appears to have no other significant injury.

DIFFERENTIAL DIAGNOSIS: Rib strain or fracture, splenomegaly, Constipation

X-RAY(?): ABDOMEN, FLAT AND UPRIGHT: no acute per EDMD.

INTERVENTION:

COUNSELING: The patient was/were counseled about the nature of the problem, and appropriate follow-up was discussed.

DIAGNOSIS: Constipation, 564.00

Gas Pain, 787.3

PRESCRIBED MEDICATIONS:

Docusate 100 mg Capsule, Disp: 30 (thirty), 1 cap(s) by mouth daily, Refills: 0 (zero).

Date: Thu Aug 30, 2012

Medical Records Copy
Page 1 of 2

KITCHENS, JR, MARKCUS, JR.
BK0001590885

DOB: 02/01/2005 # 20

02/01/2005 08/26/12

02/01/2005 08/26/12



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Patient ID: BK0001680986
Patient Name: KITCHENS, MARCUS

Magnesium Citrate, Disp: 1 (one) bottle(s), 1 bottle by mouth, single dose, for constipation, Refills: 0 (zero).
Mylicon 125 mg Tablet, Disp: 60 (sixty), 1 tab(s) by mouth 4 times a day after meals, Refills: 0 (zero).

DISPOSITION:

DISCHARGED: The patient was discharged home at 18:34. The patient was alone when discharged from the Emergency Department. The patient's condition upon discharge was stable.

FOLLOW-UP: The patient was advised to call for a follow-up appointment with the patient's personal physician in 1-2 days or sooner if symptoms worsen.

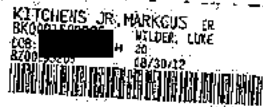
Colby Newsome PAC

I certify that the physician assistant or ARNP performed the services as delegated.

Luke Wilder, M.D.

Thu Aug 30, 2012 18:34

Requester Sign For: WILDER, LUKE JUSTIN



Date:

Thu Aug 30, 2012

Medical Records Copy
Page 2 of 2



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Markus Z
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

Page 1 of 2

Kitchens, Markus Z
238 Marcus Dr
Berea, KY, 40403
Person #: 280206
DOB: [REDACTED]

Ordering: Hackman, Vicki Performing #: QuestDias Location: Medical RPC
Tests Ordered: CBC with Diff (NG005009), CMP (NG322000), SED rate, automated (NG005215), HIV Ab (NG083850), Hep C ABW/ Ref to Hep C Virus RNA, Quan, R-T PCR (914384) (NG999244), Hep B Surface Ab, Qual (493) (NG006395), Hep B Surface Ag (NG006510)

HIV 1/2 ANTIGEN/ANTIBODY FOURTH GENERATION W/REFL (Collection Date: 02/15/2016 11:08, Status: Preliminary)

Component	Result	Units	Flag	Range	Comment
HIV AG/AB, 4TH GEN					

HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HEPATITIS C ANTIBODY	NON-REACTIVE		N	NON-REACTIVE	
SIGNAL TO CUT-OFF	0.03		N	<1.00	

HEPATITIS B SURFACE ANTIBODY QL (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HEPATITIS B SURFACE ANTIBODY QL	REACTIVE		A	NON-REACTIVE	

HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HEPATITIS B SURFACE ANTIGEN	NON-REACTIVE		N	NON-REACTIVE	

CBC (INCLUDES DIFF/PLT) (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
WHITE BLOOD CELL COUNT	4.4	Thousand/uL	N	3.8-10.8	
RED BLOOD CELL COUNT	4.67	Million/uL	N	4.20-5.80	
HEMOGLOBIN	14.9	g/dL	N	13.2-17.1	
HEMATOCRIT	44.3	%	N	38.5-50.0	
MCV	94.8	fL	N	80.0-100.0	
MCH	32.0	pg	N	27.0-33.0	
MCHC	33.7	g/dL	N	32.0-36.0	
RDW	13.7	%	N	11.0-15.0	
PLATELET COUNT	212	Thousand/uL	N	140-400	
ABSOLUTE LYMPHOCYTES	2015	cells/uL	N	850-3900	
ABSOLUTE MONOCYTES	361	cells/uL	N	200-950	
ABSOLUTE EOSINOPHILS	48	cells/uL	N	15-500	
ABSOLUTE BASOPHILS	26	cells/uL	N	0-200	
NEUTROPHILS	44.3	%	N		
LYMPHOCYTES	45.8	%	N		
MONOCYTES	8.2	%	N		
EOSINOPHILS	1.1	%	N		
BASOPHILS	0.6	%	N		
ABSOLUTE NEUTROPHILS	1949	cells/uL	N	1500-7800	
MPV	8.4	fL	N	7.5-11.5	

Patient: Kitchens, Markus Z, DOB: [REDACTED]



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

Page 2 of 2

SED RATE BY MODIFIED WESTERGREN (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
SED RATE BY MODIFIED WESTERGREN	1	mm/h	N	< OR = 15	

COMPREHENSIVE METABOLIC PANEL (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
ALBUMIN	4.6	g/dL	N	3.6-5.1	
ALBUMIN/GLOBULIN RATIO	2.1	(calc)	N	1.0-2.5	
ALKALINE PHOSPHATASE	53	U/L	N	40-115	
ALT	10	U/L	N	9-46	
AST	18	U/L	N	10-40	
BILIRUBIN, TOTAL	0.7	mg/dL	N	0.2-1.2	
BUN/CREATININE RATIO	11	(calc)	N	6-22	
CALCIUM	9.5	mg/dL	N	8.6-10.3	
CARBON DIOXIDE	28	mmol/L	N	19-30	
CHLORIDE	104	mmol/L	N	98-110	
CREATININE	1.21	mg/dL	N	0.66-1.35	
eGFR AFRICAN AMERICAN	97	mL/min/1.73m ²	N	> OR = 60	
eGFR NON-AFR. AMERICAN	83	mL/min/1.73m ²	N	> OR = 60	
GLOBULIN	2.2	g/dL (calc)	N	1.9-3.7	
GLUCOSE	66	mg/dL	N	65-99	

Fasting reference interval

POTASSIUM	4.3	mmol/L	N	3.5-5.3	
PROTEIN, TOTAL	6.8	g/dL	N	6.1-8.1	
SODIUM	140	mmol/L	N	135-146	
UREA NITROGEN (BUN)	13	mg/dL	N	7-25	

Patient: Kitchens, Marcus Z, DOB [REDACTED]



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Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

XRAY Abdomen Series w Chest

Kitchens JR, Marcus - BZ00195205

* Final Report *

Result type: XRAY Abdomen Series w Chest
Result date: 30 August 2012 18:50 EDT
Result status: Auth (Verified)
Result title: ABD ACUTE W/CHEST
Performed or Dictated: HANBA-UNKNOWN, PERSONNEL on 30 August 2012 18:50 EDT
Verified by: HANBA-UNKNOWN, PERSONNEL on 30 August 2012 18:50 EDT
Encounter info: BK0001590985, BBK SAINT JOSEPH, Emergency, 8/30/2012 - 8/30/2012
Contributor system: BBK_MT_RAD_ORU

* Final Report *

ABD ACUTE W/CHEST

St. Joseph Berea Radiology
305 Estill Street
Berea, Kentucky 40403
859-986-6550

PATIENT IDENTIFICATION: KITCHENS, MARKCUS JR (Male - 01/26/1992)
ACCOUNT / UNIT NUMBER: BK0001590985 / BZ00195205
RADIOLOGY NUMBER:
PATIENT LOCATION: ER
ADMIT DATE / TIME: 08/30/12 1649
DISCHARGE DATE / TIME:
ORDER NUMBER/EXAM/DATE/TIME: 0830-0042 RADIOLOGY ABD ACUTE W/CHEST 08/30/12

1742

ORDERING PHYSICIAN: WILDER, LUKE
PRIMARY CARE PHYSICIAN: DAVID, MIRIAM
DICTATED: 08/30/12 1850 by HANEY, BARRY
TRANSCRIBED: 08/30/12 1850 by
CC: DAVID, MIRIAM; HANEY, BARRY; WILDER, LUKE

REPORT STATUS - Draft (Preliminary) or Signed: Signed

ACUTE ABDOMINAL SERIES

HISTORY: Abdominal pain.

COMPARISON: None.

FINDINGS: The lungs are adequately expanded with no apparent infiltrate, pleural effusion or lung mass identified. Heart size appears normal. The mediastinal and bony structures appear unremarkable. No free air is identified beneath the hemidiaphragms. A nonspecific bowel gas pattern is identified with gaseous distention of the stomach, segments of small

Printed by: Bumell, Gina
Printed on: 8/31/2012 9:17 EDT

Page 1 of 2
(Continued)



BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

XRAY Abdomen Series w Chest

Kitchens JR, Marcus - BZ00195205

* Final Report *

bowel, and colon with a moderate amount of fecal material within the colon and rectum. No specific findings are identified at this time to suggest mechanical bowel obstruction. No other apparent acute abnormality is identified on this limited examination of the abdomen and pelvis.

IMPRESSION:

1. No evidence for active or acute pulmonary disease.
2. Nonspecific bowel gas pattern.
3. No specific findings for mechanical bowel obstruction can be identified on this exam at this time.

Electronically authenticated by: HANEY, BARRY <<Signature on File>> 08/30/12 1851

Status: Signed

Completed Action List:

- * Perform by on 30 August 2012 18:50 EDT
- * VERIFY by on 30 August 2012 18:50 EDT
- * Order by WILDER, LUKE JUSTIN

Printed by: Bumell, Gina
Printed on: 8/31/2012 9:17 EDT

Page 2 of 2
(End of Report)



BAPTIST HEALTH MEDICAL
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789 EASTERN BYPASS STE
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Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)

Documents (continued)

St Joseph Berea Radiology
305 Estill Street
Berea, Kentucky 40403
859-988-5860

PATIENT IDENTIFICATION: KITCHENS, MARKCUS JR
ACCOUNT / UNIT NUMBER: BK0001530985 / BZ00195205
RADIOLOGY NUMBER:
PATIENT LOCATION: ER
ADMIT DATE / TIME: 08/30/12 1649
DISCHARGE DATE / TIME:
ORDER NUMBER/EXAM/DATE/TIME: 0830-0042 RADIOLOGY ABD ACUTE W/CHEST 08/30/12 1742
ORDERING PHYSICIAN: WILDER, LUKE
PRIMARY CARE PHYSICIAN: DAVID, MIRIAM
DICTATED: 08/30/12 1850 by HANEY, BARRY
TRANSCRIBED: 08/30/12 1850 by
CC: DAVID, MIRIAM; HANEY, BARRY; WILDER, LUKE

REPORT STATUS - Draft (Preliminary) or Signed: Signed

ACUTE ABDOMINAL SERIES

HISTORY: Abdominal pain.

COMPARISON: None.

FINDINGS: The lungs are adequately expanded with no apparent infiltrate, pleural effusion or lung mass identified. Heart size appears normal. The mediastinal and bony structures appear unremarkable. No free air is identified beneath the hemidiaphragms. A nonspecific bowel gas pattern is identified with gaseous distention of the stomach, segments of small bowel, and colon with a moderate amount of fecal material within the colon and rectum. No specific findings are identified at this time to suggest mechanical bowel obstruction. No other apparent acute abnormality is identified on this limited examination of the abdomen and pelvis.

IMPRESSION:

1. No evidence for active or acute pulmonary disease.
2. Nonspecific bowel gas pattern.
3. No specific findings for mechanical bowel obstruction can be identified on this exam at this time.

Electronically authenticated by: HANEY, BARRY <<Signature on File>> 08/30/12 1851

Status: Signed

AUG 31 2012

REPT #: 0830-0090

Additional copy

1 of 1

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
 789 EASTERN BYPASS STE
 23
 RICHMOND KY 40475-2421

Kitchens, Marcus Z
 MRN: 8912785729
 Visit date: 2/6/2023

Sex: M

02/06/2023 - Office Visit in **BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND**
 (continued)

Documents (continued)

White House Clinics
 1010 Main Street South
 Mc Kee, KY, 404477089
 Phone #: (855) 942-7787

Kitchens, Marcus Z
 238 Marcellus Dr
 APT 2
 Berea, KY, 40403
 Person #: 280205, MRN: 56088
 Sex: M
 DOB:

Order Date: 02/15/2016
 Order #: PRQ3753755

Ordering: Hackman, Vicki Performing #: QuestDiag Location: Medical BPC
 Tests Ordered: CBC with Diff (N6005009), CMP (NG322000), Hep B Surface Ab, Qual (499) (NG006395), Hep B Surface Ag (NG006510), Hep C AB W/ Ref to Hep C Virus RNA, Quan, R-T PCR (914388) (NG999244), HIV Ab (NG083850), SED rate, automated (NG005215)

HIV 1/2 ANTIGEN/ANTIBODY, FOURTH GENERATION W/REFL (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HIV AG/AB, 4TH GEN	NON-REACTIVE			NON-REACTIVE	<p>A Nonreactive HIV Ag/Ab result does not exclude HIV infection since the time frame for seroconversion is variable. If acute HIV infection is suspected, a HIV-1 RNA Qualitative TMA test is recommended.</p> <p>PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.</p> <p>The performance of this assay has not been clinically validated in patients less than 2 years old.</p> <p>For additional information please refer to http://education.questdiagnostics.com/faq/FAQ106 (This link is being provided for informational/educational purposes only.)</p>

HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HEPATITIS C ANTIBODY	NON-REACTIVE			NON-REACTIVE	
SIGNAL TO CUT-OFF	0.03			<1.00	

Patient: Kitchens, Marcus Z, DOB:



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Visit date: 2/6/2023

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**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

HEPATITIS B SURFACE ANTIBODY QL (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HEPATITIS B SURFACE ANTIBODY QL	REACTIVE		A	NON-REACTIVE	

HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
HEPATITIS B SURFACE ANTIGEN	NON-REACTIVE			NON-REACTIVE	

CBC (INCLUDES DIFF/PLT) (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
WHITE BLOOD CELL COUNT	4.4	Thousand/uL		3.8-10.8	
RED BLOOD CELL COUNT	4.67	Million/uL		4.20-5.80	
HEMOGLOBIN	14.9	g/dL		13.2-17.1	
HEMATOCRIT	44.3	%		38.5-50.0	
MCV	94.8	fL		80.0-100.0	
MCH	32.0	pg		27.0-33.0	
MCHC	33.7	g/dL		32.0-36.0	
RDW	13.7	%		11.0-15.0	
PLATELET COUNT	212	Thousand/uL		140-400	
ABSOLUTE LYMPHOCYTES	2015	cells/uL		850-3900	
ABSOLUTE MONOCYTES	361	cells/uL		200-950	
ABSOLUTE EOSINOPHILS	48	cells/uL		15-500	
ABSOLUTE BASOPHILS	26	cells/uL		0-200	
NEUTROPHILS	44.3	%			
LYMPHOCYTES	45.8	%			
MONOCYTES	8.2	%			
EOSINOPHILS	1.1	%			
BASOPHILS	0.6	%			
ABSOLUTE NEUTROPHILS	1949	cells/uL		1500-7800	
MPV	8.4	fL		7.5-11.5	

SED RATE BY MODIFIED WESTERGRN (Collection Date: 02/15/2016 11:08, Status: Final)

Component	Result	Units	Flag	Range	Comment
SED RATE BY MODIFIED WESTERGRN	1	mm/h		< OR = 15	

COMPREHENSIVE METABOLIC PANEL (Collection Date: 02/15/2016 11:08, Status: Final)

Patient: Kitchens, Marcus Z, DOB: [REDACTED]



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(continued)**

Documents (continued)

Component	Result	Units	Flag	Range	Comment
ALBUMIN	4.6	g/dL		3.6-5.1	
ALBUMIN/GLOBULIN RATIO	2.1	(calc)		1.0-2.5	
ALKALINE PHOSPHATASE	53	U/L		40-115	
ALT	10	U/L		9-46	
AST	18	U/L		10-40	
BILIRUBIN, TOTAL	0.7	mg/dL		0.2-1.2	
BUN/CREATININE RATIO	11	(calc)		5-22	
CALCIUM	9.5	mg/dL		8.6-10.3	
CARBON DIOXIDE	28	mmol/L		19-30	
CHLORIDE	104	mmol/L		98-110	
CREATININE	1.21	mg/dL		0.60-1.35	
eGFR AFRICAN AMERICAN	97	mL/min/1.73m2		> OR = 60	
eGFR NON-AFR. AMERICAN	83	mL/min/1.73m2		> OR = 60	
GLOBULIN	2.2	g/dL (calc)		1.9-3.7	
GLUCOSE	66	mg/dL		65-99	
Fasting reference interval					
POTASSIUM	4.3	mmol/L		3.5-5.3	
PROTEIN, TOTAL	6.8	g/dL		6.1-8.1	
SODIUM	140	mmol/L		135-146	
UREA NITROGEN (BUN)	13	mg/dL		7-25	

Patient: Kitchens, Marcus Z, DOB: [REDACTED]

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(continued)

Documents (continued)

BEHAVIORAL HEALTH - SCAN - Scan on 2/3/2023 1234: CPT TEST

Scan (below)



CONNERS CPT3[™]
Continuous Performance Test 3rd Edition[™]
C. Keith Connors, Ph.D.

Assessment Report

Name/ID:	MARKCUS KITCHENS
Age:	31
Gender:	Male
Birth Date:	
Administration Date:	February 3, 2023
Normative Option:	Gender Specific norms
Input Device:	Keyboard
Assessor's Name:	
Medication/Notes:	

This Assessment Report is intended for use by qualified assessors only, and is not to be shown or presented to the respondent or any other unqualified individuals or used as the sole basis for clinical diagnosis or intervention. Administrators are cautioned against drawing unsupported interpretations. To obtain a comprehensive view of the individual, information from this report should be combined with information gathered from other psychometric measures, interviews, observations, and available records. This report is based on an algorithm that produces the most common interpretations of the obtained scores. Additional interpretive information is found in the *Connors CPT3 Manual* (published by MHS).



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Documents (continued)

Introduction



The Conners Continuous Performance Test 3rd Edition (Conners CPT 3rd) assesses attention-related problems in individuals aged 8 years and older. During the 14-minute, 360-trial administration, respondents are required to respond when any letter appears, except the non-target letter "X." By indexing the respondent's performance in areas of inattentiveness, impulsivity, sustained attention, and vigilance, the Conners CPT 3 can be a useful adjunct to the process of diagnosing Attention-Deficit/Hyperactivity Disorder (ADHD), as well as other psychological and neurological conditions related to attention.

Validity of Administration

The Conners CPT 3 performs a validity check based on the number of hits and omission errors committed, as well as a self-diagnostic check of the accuracy of the timing of each administration. If there is an insufficient number of hits to compute scores, and/or if the omission error rate exceeds 25%, these issues will be noted. Also, the program will issue a warning message noting that the administration was invalid if a timing issue is detected.

There was no indication of any validity issues; the current administration should be considered valid.

Response Style Analysis

The variable C represents an individual's natural response style in tasks that involve a speed-accuracy trade-off. Based on his or her score on this variable, a respondent can be classified as having one of the following three response styles: a conservative style (T-score ≥ 60) of responding that emphasizes accuracy over speed; a liberal style (T-score ≤ 40) of responding that emphasizes speed over accuracy; or a balanced style (T-score ≥ 41 -59) of responding that is sensitive to both speed and accuracy. Based on MARKCUS's responses, he has a conservative style of responding that emphasizes accuracy over speed (T-score = 60). This response style is often associated with slower reaction times, more omission errors (failure to respond to targets), and fewer commission errors (incorrect responses to non-targets). The influence of MARKCUS's conservative response style on other Conners CPT 3 scores should be taken into consideration throughout the interpretation process.

T-score Guidelines

The guidelines in the following table apply to all T-scores in this report.

Guidelines			
T-score	For Hit Reaction Time (HRT)	T-score	For all other variables
70+	Atypically Slow	70+	Very Elevated
60-69	Slow	60-69	Elevated
55-59	A Little Slow	55-59	High Average
45-54	Average	45-54	Average
40-44	A Little Fast	< 45	Low
< 40	Atypically Fast		

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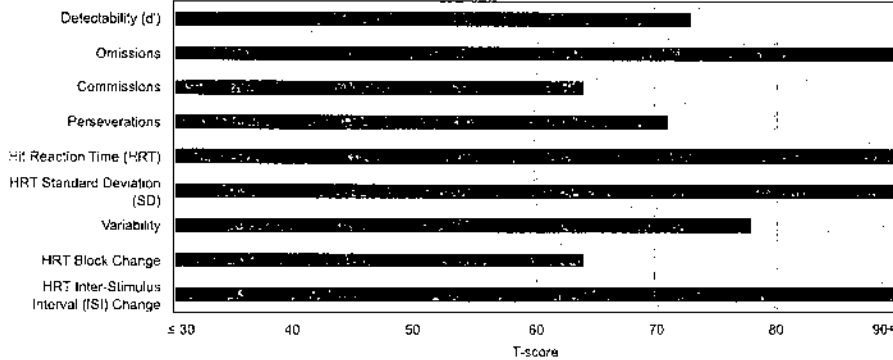
**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Documents (continued)

Overview of Conners CPT 3 Scores

MHS

This section provides an overview of MARKCUS's Conners CPT 3 scores.



Variable Type	Measure	T-score	Guideline	Interpretation
Detectability	d'	73	Very Elevated	Pronounced difficulty differentiating targets from non-targets.
Error Type	Omissions	90	Very Elevated	Very high rate of missed targets.
	Commissions	64	Elevated	High rate of incorrect responses to non-targets.
	Perseverations	71	Very Elevated	Very high rate of random, repetitive, or anticipatory responses.
Reaction Time Statistics	HRT	90	Atypically Slow	Very slow mean response speed.
	HRT SD	90	Very Elevated	Very high inconsistency in reaction times.
	Variability	78	Very Elevated	Very high variability in reaction time consistency.
	HRT Block Change	64	Elevated	Substantial reduction in response speed in later blocks.
	HRT ISI Change	90	Very Elevated	Very substantial reduction in response speed at longer ISIs.

Summary: Relative to the normative sample, MARKCUS was less able to differentiate targets from non-targets, made more omission errors, made more commission errors, made more perseverative errors, responded more slowly, displayed less consistency in response speed, displayed more variability in response speed, displayed more of a reduction in response speed in later blocks and displayed more of a reduction in response speed at longer ISIs.

Overall, MARKCUS has a total of 9 atypical T-scores, which is associated with a very high likelihood of having a disorder characterized by attention deficits, such as ADHD. Note that other psychological and/or neurological conditions with symptoms of impaired attention can also lead to atypical scores on the Conners CPT 3.

MARKCUS's profile of scores and response pattern indicates that he may have issues related to:
• Inattentiveness (Strong Indication) • Sustained Attention (Some Indication) • Vigilance (Some Indication)



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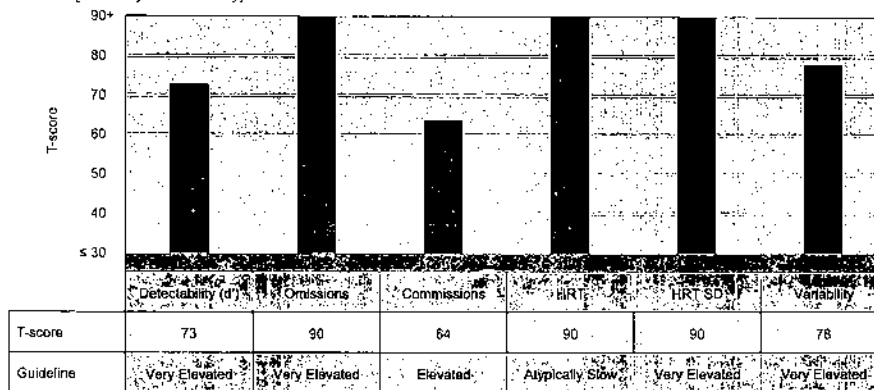
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Documents (continued)

Measures of Inattentiveness



This section summarizes MARKCUS's scores on the inattentiveness measures and provides information about how he compares to the normative group. Indicators of inattentiveness on the Conners CPT 3 are poor Detectability (d'), a high percentage of Omissions and Commissions, a slow Hit Reaction Time (HRT), as well as high levels of inconsistency in response speed (Hit Reaction Time Standard Deviation [HRT SD] and Variability).



Detectability (d') measures the respondent's ability to differentiate non-targets (i.e., the letter X) from targets (i.e., all other letters). MARKCUS's T-score is 73 and falls in the Very Elevated range. This result means that his ability to discriminate non-targets from targets was very poor when compared to the normative group. Poor ability to differentiate non-targets from targets is an indicator of inattentiveness.

Omissions result from a failure to respond to targets. MARKCUS's T-score is 90 and falls in the Very Elevated range. This result means that he missed a much higher percentage of targets when compared to the normative group. Failure to respond to targets is an indicator of inattentiveness.

Commissions are made when responses are given to non-targets. MARKCUS's T-score is 64 and falls in the Elevated range. This result means that he responded to a higher percentage of non-targets when compared to the normative group. A high level of commission errors may be related to inattentiveness and/or impulsivity. The combination of MARKCUS's slow response times (see HRT, below) and high commission errors is an indicator of inattentiveness.

HRT is the mean response speed of correct responses for the whole administration. MARKCUS's T-score is 90 and falls in the Atypically Slow range. This result means that his response speed was much slower than the normative group's response speed. This may indicate that MARKCUS was not processing targets efficiently. Note that HRT may also be affected by response style; MARKCUS's conservative response style may have contributed to the slower response speed. See the *Response Style Analysis* section of this report for more interpretive information.

HRT SD is a measure of response speed consistency during the entire administration. MARKCUS's T-score is 90 and falls in the Very Elevated range. This result means that his response speed was much less consistent than the normative group. This suggests that MARKCUS was more inattentive and processed stimuli less efficiently during some portions of the administration.

Variability, like HRT SD, is a measure of response speed consistency, however, Variability is a "within respondent" measure; that is, the amount of variability that MARKCUS showed in 18 separate segments of the administration in relation to his own overall HRT SD. MARKCUS's T-score is 78 and falls in the Very Elevated range. This result means his response speed variability was much higher when compared to the normative group. High response speed variability indicates that MARKCUS's attention and information processing efficiency varied throughout the administration.

MARKCUS's scores on these measures strongly suggest that he may have problems with inattentiveness.

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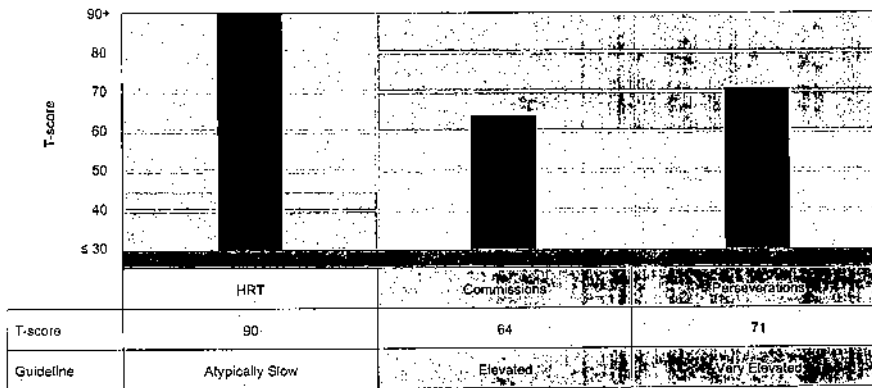
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(continued)**

Documents (continued)

Measures of Impulsivity



This section summarizes MARKCUS's scores on the impulsivity measures and provides information about how he compares to the normative group. Indicators of impulsivity on the Conners CPT 3 include a faster than normal Hit Reaction Time (HRT) in addition to a higher than average rate of Commissions and/or Perseverations.



HRT is the mean response speed of correct responses for the whole administration. MARKCUS's T-score is 90 and falls in the Atypically Slow range. This result means that his response speed was much slower than the normative group's response speed. This may indicate that MARKCUS was not processing targets efficiently. A slower than normal HRT is often related to inattentiveness rather than impulsivity. See the *Measures of Inattentiveness* section of this report for more interpretative information.

Commissions are made when responses are given to non-targets. MARKCUS's T-score is 64 and falls in the Elevated range. This result means that he responded to a higher percentage of non-targets when compared to the normative group. Commission errors may be related to impulsivity and/or inattentiveness. The combination of MARKCUS's slow response times (see HRT, above) and high commission errors is an indicator of inattentiveness rather than impulsivity.

Perseverations are random or anticipatory responses. MARKCUS's T-score is 71 and falls in the Very Elevated range. This result means that he made many more perseverative errors when compared to the normative group. Because MARKCUS's response speed (see HRT, above) was slow, his perseverations are unlikely to be related to impulsivity.

MARKCUS's scores on these measures do not indicate a problem with impulsivity.

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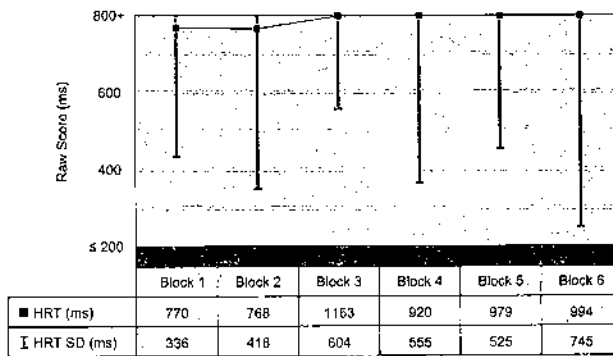
Documents (continued)

Measures of Sustained Attention

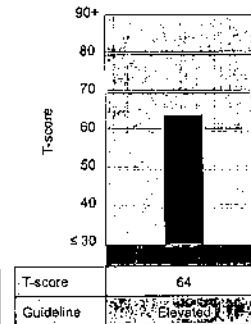


This section summarizes MARKCUS's scores on the sustained attention measures. Sustained attention is defined as the respondent's ability to maintain attention as the administration progresses. A decrease in sustained attention across time is captured by atypical slowing in the respondent's Hit Reaction Times (HRT; as indicated by the variable HRT Block Change), as well as by increases in Omissions and Commissions in later blocks of the administration.

Hit Reaction Time by Block

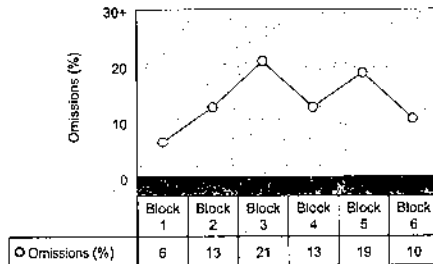


HRT Block Change

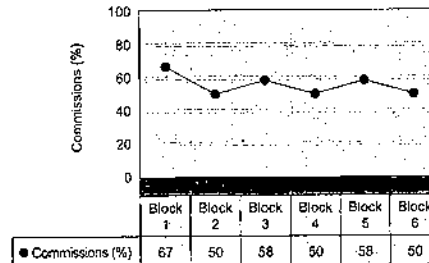


Note. ms = milliseconds; SD = Standard Deviation.

Omissions by Block



Commissions by Block



Note. No statistically significant differences were found in error rates between blocks.

HRT Block Change indicates the change in mean response speed across blocks. MARKCUS's T-score is 64 and falls in the Elevated range. This result means that he had a substantial reduction in response speed in later blocks. In terms of error rates, MARKCUS's omission and commission errors did not increase significantly across multiple adjacent blocks. MARKCUS's profile of scores on these measures indicates some support for a problem with sustained attention.



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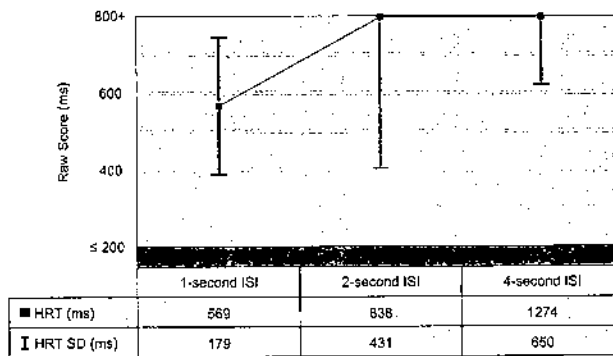
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Measures of Vigilance



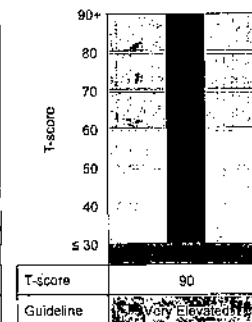
This section summarizes MARKCUS's scores on the vigilance measures. Vigilance relates to the respondent's performance at varying levels of stimulus frequency (inter-stimulus intervals; ISIs), and is defined by the respondent's ability to maintain performance level even when the task rate is slow. This construct is captured by changes in the respondent's Hit Reaction Times (HRT), as indicated by the variable HRT ISI Change, as well as the observed pattern of Omissions and Commissions at various ISIs.

Hit Reaction Time by ISI

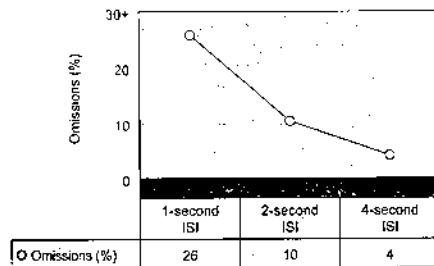


Note. ms = milliseconds; SD = Standard Deviation.

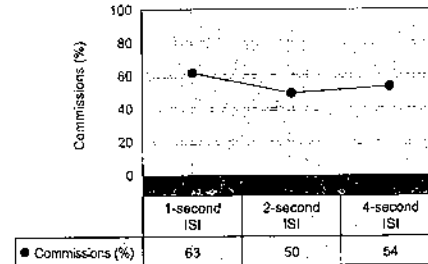
HRT ISI Change



Omissions by ISI



Commissions by ISI



Note. No statistically significant differences were found in error rates between ISIs.

HRT ISI Change indicates the change in mean response speed at various ISIs. MARKCUS's T-score is 90 and falls in the Very Elevated range. This result means that he had a very substantial reduction in response speeds at longer ISIs. There was no statistically significant increase in error rates across all three ISI levels. MARKCUS's profile of scores on these measures indicates some support for a problem with maintaining vigilance; that is, he had some problems with performance on trials with longer intervals between stimuli.

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(continued)****Documents (continued)****Glossary****Response Style**

C' is a signal detection statistic that measures an individual's natural response style in tasks involving a speed-versus-accuracy trade-off. Based on his or her score on this variable, a respondent can be classified as having one of the following three response styles: a *conservative* style that emphasizes accuracy over speed; a *liberal* style that emphasizes speed over accuracy; or a *balanced* style that is biased neither to speed nor accuracy. Response style can affect scores such as Commissions and Hit Reaction Time (HRT), and should be taken into consideration during interpretation.

Detectability (d')

d' -prime (d') is a measure of how well the respondent discriminates non-targets (i.e., the letter X) from targets (i.e., all other letters). This variable is also a signal detection statistic that measures the difference between the signal (targets) and noise (non-targets) distributions. In general, the greater the difference between the signal and noise distributions, the better the ability to distinguish non-targets and targets. On the Connors CPT 3, d' is reverse-scored so that higher raw score and Z-score values indicate worse performance (i.e., poorer discrimination).

Omissions (%)

Omissions are missed targets. High omission error rates indicate that the respondent was not responding to the target stimuli due to a specific reason (e.g., difficulty focusing). Omission errors are generally an indicator of inattentiveness.

Commissions (%)

Commissions are incorrect responses to non-targets. Depending on the respondent's HRT, high commission error rates may indicate either inattentiveness or impulsivity. If high commission error rates are coupled with slow reaction times, then the respondent was likely inattentive to the stimulus type being presented and thus responded to a high rate of non-targets. If high commission error rates are combined with fast reaction times, the respondent was likely rushing to respond and failed to control his or her impulses when responding to the non-targets. In the latter case, high commission error rates would reflect impulsivity rather than inattentiveness.

Perseverations (%)

Perseverations are responses that are made in less than 100 milliseconds following the presentation of a stimulus. Normal expectations of physiological ability to respond make it virtually impossible for a respondent to perceive and react to a stimulus so quickly. Perseverations are usually either slow responses to a preceding stimulus, a random response, an anticipatory response, or a repeated response without consideration of the task requirements. Perseverations may be related to impulsivity or an extremely liberal response style. Perseverations are, therefore, likely the result of anticipatory, repetitive, or impulsive responding.

Hit Reaction Time (HRT)

HRT is the mean response speed, measured in milliseconds, for all non-perseverative responses made during the entire administration. An atypically slow HRT may indicate inattentiveness (especially when error rates are high), but it may also be the result of a very conservative response style. Alternatively, a very fast HRT, when combined with high commission error rates, may indicate impulsivity.

Hit Reaction Time Standard Deviation (HRT SD)

HRT SD measures the consistency of response speed to targets for the entire administration. A high HRT SD indicates greater inconsistency in

response speed. Response speed inconsistency is sometimes indicative of inattentiveness, suggesting that the respondent was less engaged and processed stimuli less efficiently during some parts of the administration.

Variability

Variability, like HRT SD, is a measure of response speed consistency; however, Variability is a "within respondent" measure (i.e., the amount of variability the respondent showed in 18 separate sub-blocks of the administration in relation to his or her overall HRT SD score). Although Variability is a different measure than HRT SD, the two measures typically produce comparable results and are both related to inattentiveness. High response speed variability indicates that the respondent's attention and processing efficiency varied throughout the administration.

**Hit Reaction Time Block Change
(HRT Block Change)**

HRT Block Change is the slope of change in HRT across the six blocks of the administration. A positive slope indicates decelerating reaction times as the administration progressed, while a negative slope indicates accelerating reaction times. If reaction times slow down, as indicated by a higher HRT Block Change score, the respondent's information processing efficiency declines, and a loss of sustained attention is indicated.

Omissions by Block

Omissions by Block (raw score only) is the rate of the respondent's missed targets in each of the six blocks. An increase in omission error rate in later blocks indicates a loss of sustained attention.

Commissions by Block

Commissions by Block (raw score only) is the rate of the respondent's incorrect responses to non-targets in each of the six blocks. An increase in commission error rate in later blocks indicates a loss of sustained attention.

**Hit Reaction Time Inter-Stimulus Intervals
Change (HRT ISI Change)**

HRT ISI Change is the slope of change in reaction time across the three ISIs (1, 2, and 4 seconds). A positive slope indicates decelerating HRT at longer intervals; whereas, a negative slope indicates accelerating HRT at longer intervals. A higher HRT ISI Change score means that the respondent's information processing efficiency declined with longer pauses between stimuli, and a loss of vigilance is indicated. A significant change in response speed at the different ISIs may indicate that the respondent was having trouble adjusting to changing task demands. Sometimes, this finding relates to activation/arousal needs; some respondents may be more efficient in a busier/more stimulating environment (e.g., during the 1-second ISI) than in a less active environment where the stimuli are presented less frequently (e.g., during the 4-second ISI), or vice-versa.

Omissions by ISI

Omissions by ISI (raw score only) is the rate of missed targets in each of the three ISI trial types. An increase in omission error rate on trials with longer ISIs indicates a loss of vigilance.

Commissions by ISI

Commissions by ISI (raw score only) is the rate of incorrect responses to non-targets in each of the three ISI trial types. An increase in commission error rates on trials with longer ISI indicates a loss of vigilance.

Instructions for After Discharge

BAPTIST HEALTH MEDICAL
GROUP BEHAVIORAL
HEALTH
789 EASTERN BYPASS STE
23
RICHMOND KY 40475-2421

Kitchens, Marcus
MRN: 8912785729,
Visit date: 2/6/2023

Sex: M

**02/06/2023 - Office Visit in BAPTIST HEALTH MEDICAL GROUP BEHAVIORAL HEALTH RICHMOND
(continued)**

Patient Instructions

None

- Call **911** or have someone take you to the Emergency Department if you have any of the following:
- Sudden numbness or weakness of your face, arm or leg especially on one side of the body
- Sudden confusion, difficulty speaking or trouble understanding
- Changes in your vision or loss of sight in one eye
- Sudden severe headache with no known cause
- Sudden dizziness, trouble walking, loss of balance or coordination

It is important to seek emergency care right away if you have further stroke symptoms. If you get emergency help quickly, the powerful clot-dissolving medicines can reduce the disabilities caused by a stroke.

For more information:

American Stroke Association
1-888-4-STROKE
www.strokeassociation.org

IF YOU SMOKE OR USE TOBACCO PLEASE READ THE FOLLOWING:

Why is smoking bad for me?

Smoking increases the risk of heart disease, lung disease, vascular disease, stroke, and cancer. If you smoke, **STOP!**

For more information:

Quit Now Kentucky
1-800-QUIT-NOW
<https://kentucky.quitlogix.org/en-US/>

If you feel like life is too tough and are thinking of suicide or injuring yourself, get help right away!

- Call or text 988 to speak to someone.